

Spring 2015

# Student Health Benefits Plan Market Research and Analysis

Zachary William Doucette

University of New Hampshire - Main Campus, [zwdoucette@gmail.com](mailto:zwdoucette@gmail.com)

Follow this and additional works at: <https://scholars.unh.edu/honors>



Part of the [Health and Medical Administration Commons](#), and the [Marketing Commons](#)

---

## Recommended Citation

Doucette, Zachary William, "Student Health Benefits Plan Market Research and Analysis" (2015). *Honors Theses and Capstones*. 223.  
<https://scholars.unh.edu/honors/223>

This Senior Honors Thesis is brought to you for free and open access by the Student Scholarship at University of New Hampshire Scholars' Repository. It has been accepted for inclusion in Honors Theses and Capstones by an authorized administrator of University of New Hampshire Scholars' Repository. For more information, please contact [nicole.hentz@unh.edu](mailto:nicole.hentz@unh.edu).

**University of New Hampshire**  
**College of Health and Human Resources**  
**Department of Health Management and Policy**

**Student Health Benefits Plan Market Research and Analysis**

**Prepared by: Zachary W. Doucette**  
**Department of Health Management and Policy**  
**May 8, 2015**

# Student Health Benefits Plan Market Research and Analysis

By Zachary W. Doucette

## Abstract:

The University of New Hampshire (UNH) in Durham, New Hampshire requires all full-time students to have health insurance meeting set requirements as a condition of enrollment. UNH offers its own health plan, entitled the Student Health Benefits Plan (SHBP) through its Health Services Center to students as a way to procure this insurance if they lack insurance, or if their current insurance is insufficient or does not meet the insurance requirements. Health Services at UNH is looking for market research on current attitudes, perceptions, and beliefs of both students at UNH, and the parents of students who currently have a child utilizing the SHBP of health insurance knowledge, involvement, and the SHBP. As a way to measure this, separate surveys were administered to each of these two segments. The results show that UNH students have little knowledge of health insurance, and almost no involvement in choosing their health insurance, but would be likely to discuss it with their parents if they found a good alternative in the SHBP. Parents with children on the SHBP are generally satisfied with the plan as a whole, save for some aspects such as pharmaceutical coverage and Basix Dental Savings. The framework for a marketing campaign to increase enrollment based on this research is discussed, including a new slogan, logo, and potential new name for the SHBP. However, the campaign itself has yet to start, but will likely be implemented in 2015 or 2016.

## Introduction:

The University of New Hampshire (UNH) requires that all full-time students have health insurance coverage meeting a set standard as a condition of enrollment. UNH requires that these students enroll in the Student Health Benefits Plan (SHBP) while enrolled at UNH, or waive enrollment in the plan if they already have established, sufficient health insurance coverage. The plan is run through Health Services; however, it is administered by Harvard Pilgrim, a national private insurer.

The students established health insurance can be private or government insurance, but self-pay is not an option. Students may waive enrollment in the SHBP only if all of these criteria are met:

- “Provides the 10 Essential Health Benefits specified in the Affordable Care Act (ambulatory patient services; emergency services; hospitalization; maternity and newborn care; mental health and substance use disorder services, including behavioral health treatment; prescription drugs; rehabilitative and habilitative services and devices; laboratory services; preventive and wellness services and chronic disease management; and pediatric services, including oral and vision care);
- Includes access to mental health care providers in the Durham, Manchester or Concord, NH, area;  
Includes access to hospital and physician providers in the Durham, Manchester or Concord, NH, areas for BOTH EMERGENCY AND ROUTINE CARE;
- Will remain in effect for the entire academic year (except for termination due to attainment of a maximum age, or other situation resulting in a loss of plan eligibility); and
- Does not have a deductible greater than \$500 (if it is greater than \$500, you must certify that you have adequate financial resources to cover the deductible) (University of New Hampshire, 2015)”.

Coverage from the SHBP lasts as long as students remain full-time, and extends across periods between semesters, such as during the Summer and over January break. With many students being away from their hometowns and primary care providers, it is important that they have sufficient health insurance to allow them access to care near the University, including Health Services on campus for urgent care, triage, pharmacy, and

general medical visits, and the nearby hospitals such as Wentworth Douglas in Dover, NH and Portsmouth Regional in Portsmouth, NH for emergency care and hospitalization.

The SHBP offers comprehensive coverage for most services, with some exceptions such as weight-loss treatments, experimental treatments, and many other elective procedures. In addition to health coverage, the plan offers a dental savings plan through Basix, as well as prescription drug coverage for drugs received through the pharmacy at Health Services. The prescription drug coverage also has exclusions, such as experimental drugs, dispensing limitations, and cosmetic drugs. It is a PPO plan, but offers out-of-network coverage with a \$250 deductible, 20% coinsurance, and a \$6,350 coinsurance maximum that includes the plan deductible. The plan's coinsurance for any applicable covered service is 15%, with copays ranging from \$0 for preventive care, to \$150 for emergency room visits, to \$250 for inpatient mental health and/or substance abuse admissions. The yearly coinsurance maximum for the plan is \$3,500 for medical visits and treatments, and \$1,000 for prescription drugs.

The cost of the plan is on the lower end of the spectrum compared to other health plans that could be found on the New Hampshire Health Exchange. With a premium of \$190 per month on average and a \$0 yearly deductible, the plan markets itself as “A gold level plan at a bronze level price”, referring to the levels of coverage and monthly charges synonymous with state health insurance exchanges. The New Hampshire Health Exchange to compare this to some of available plan prices using the demographic and health information of the researcher – a 21 year old male, with no health insurance (for the purpose of simulating as such), a non-smoker/parent who is not pregnant with a household income of \$30,000 for 1 person covered (Assumption of a \$14.42/hour pay at 40 hours per week for 52 weeks – similar to what the researcher was able to obtain for an hourly pay rate at an internship at a New Hampshire hospital in Summer 2014. A comparison of the average costs for plans on the New Hampshire Health Exchange compared to the SHBP using these criteria can be seen in Figure 1. As Figure 1 shows, the SHBP has an average monthly deductible \$8 less than a Bronze Plan, a deductible of \$0, which is \$5,040 less than the average deductible of a Bronze Plan, and covers 80c on the dollar of treatment costs – on par with a gold plan. This means that the current slogan of the SHBP “A gold plan as a bronze price” is accurate.

**Figure 1:** Comparison of Exchange Plan Average Costs

	Bronze	Silver	Gold	Platinum	Catastrophic	SHBP
Number of Plans Available	15	16	7	1	3	1
Average Monthly Premium	\$198	\$258	\$314	\$520	\$152	\$190
Average Yearly Deductible	\$5,040	\$2,597	\$879	\$0	\$6,600	\$0
Cents on Dollar Covered	60c	70c	80c	90c	100c after deductible	80c

The Student Health Benefits Plan has an enrollment of approximately 2,700 students of the current 15,000 UNH students as of Fall 2014 (18% of the student population). Approximately 700 of these students are from the Navitas international student program, and are mandatorily enrolled in the SHBP, as required by UNH. This means that there are approximately 2,000 students enrolled in the plan voluntarily (13.33% of the student population). This is the population that this study will be focusing on.

This study involves three major sections. The first two sections involve obtaining information through research surveys. The third section involves building the framework for a marketing campaign to promote future enrollment in the SHBP. The first section is a survey of current UNH undergraduate students. The second

section is a survey of parents who currently have at least one student currently enrolled in the SHBP. The research sections of this study will directly build into the marketing design in the third section.

UNH Health Services wants to increase its enrollment in the SHBP throughout the University in order to maintain the program and continue to offer it in the future, while reducing overall costs. The goals of the research, as well as the target segments are as follows:

### **Research Goals:**

Increase UNH Health Services' current understanding of attitudes, perceptions, and beliefs of the SHBP and health insurance in general of current UNH students, and parents of students currently enrolled in the SHBP.

### **Research Target Segments:**

The main targeted segments of this marketing research are as follows:

- Parents of current UNH students who currently have their child enrolled in the Student Health Benefits Plan.
- Current undergraduate UNH students.

## **Literature Review:**

University required health insurance is not uncommon in the United States. A study done in 2007 by the American College Health Association found that 57% of colleges and universities in the United States (38% of public, four-year colleges and 79% of private schools) require some level of health insurance coverage (Collier, 2009) (McIntosh, 2012). The requirements for the plans vary greatly in terms of services covered, benefit caps and cost requirements (McIntosh, 2012). Many of these plans lack mental health services coverage and prescription drug coverage requirements (McIntosh, 2012). This is a serious problem, as a survey done by the American College Counseling Association for the 2010-2011 school year noted that "44% of students presenting to the counseling centers suffer from 'severe psychological problems'" (McIntosh, 2012). This means that it is critical that college student health plans offer some mental health services coverage to meet the needs of their enrollees.

A study done by McIntosh, Compton, and Druss notes that the US Government Accountability Office found that there were "an estimated 1,500 to 2,000 university-based health insurance plans in effect at colleges and universities across the United States" in 2012 (2012). The most recent trend is for schools to contract with outside insurance companies to administer the plan (McIntosh, 2012). Approximately 25% of college students at four-year programs in the United States are uninsured, with some states like Texas seeing uninsured student rates approaching 50% - this means that students need affordable, quality health plans available to them while at college (Collier, 2009). Those that are insured (~75-80%) are mostly covered by their parent's plans, public programs, or employer insurance programs (Duhon, 2010).

Stephen Beckley, a health insurance consultant, said in 2009 that 22 states were looking into legal mandates for college students to have health coverage of some kind, but to what level of seriousness these notions were is unclear (Collier, 2009). With the implementation of the ACA allowing students to stay on their parents' health insurance until age 26, this number has gone down. A study done by the US Government Accounting Office in 2011 notes that community colleges and 4-year program public colleges differ greatly in how commonly they offer student health insurance plans. The study found that 82% of 4-year colleges offered an insurance plan, compared to only 29% of community colleges (Chiauzzi, 2011).

As of 2012, there were over 1,000,000 college students enrolled in their college-offered plans in the United States, and it has only grown since then (Sheehy, 2012). At two-year community colleges, a high percent of students are from minority groups who attend part time, often making them ineligible for student health insurance at the institution (Duhon, 2010). However, some colleges and universities are beginning to cease offering forms of student health insurance. This is due to “a provision in the Affordable Care Act that prevents students from using premium tax subsidies to purchase insurance from their college or university, according to Steven M. Bloom, director of federal relations for the American Council on Education, a group representing the presidents of US colleges and universities” (Blankinship, 2015). As of March 29, 2015, four colleges and universities in New Jersey, and three in Washington state have ceased offering student insurance (Blankinship, 2015).

Many Universities employ some degree of marketing to increase enrollment in their Student Health Plans. For example, Northeastern University in Boston, Massachusetts created a video ([http://www.youtube.com/watch?v=G-9R9Gz2BHk&feature=player\\_embedded](http://www.youtube.com/watch?v=G-9R9Gz2BHk&feature=player_embedded)) to market its new Student Health Plan in 2013. The video was made to help rebrand the university’s health plan, as it was not particularly high-quality before, and had a very negative reputation, with the university itself sometimes stressing that students do their best to find some other form of coverage (S. Beckley, Personal Communication, November 18, 2014). Northeastern University completely overhauled their Student Health Plan in response to this to its current state. After they created the video and overhauled their benefits plan, Northeastern University saw their enrollment in the plan increase by approximately 5,000 students to reach its current enrollment of about 8,000. With an estimated 19,000 students attending Northeastern, 42% are enrolled in the Student Health Plan. According to Mr. Steven Beckley, this was in great part due to the system overhaul followed by the marketing campaign rebranding and remarketing it to students and their parents (S. Beckley, Personal Communication, November 18, 2014). This in great part shows how marketing can increase enrollment in student health insurance plans, especially when done right.

## Methods:

Two surveys were administered in order to obtain information for this study.

The first was a thirteen-question paper survey administered to current undergraduate UNH students. This survey can be found in Appendix A. Three active UNH classrooms of students were surveyed during the month of April, 2015. These classes were:

- Nutrition 400: Nutrition in Health and Well Being, taught by Professor Joanne, Curran-Celentano (n=34)
- Nutrition 506: Nutrition and Wellness, taught by Professor Jesse Morrell (n=44)
- Health Management and Policy 501: Epidemiology and Community Medicine, taught by Professor Ann-Marie Matteucci (n=51)

In total, 129 student responses were gathered. There was a 100% response rate from students who were in the class. These classes were not at their normal capacity when the survey were administered, as some students did not attend the class on the day the survey was administered.

The second survey was a ten-question, electronic survey administered to parents who currently had at least one student enrolled in the SHBP.

This survey was done using the survey software, Qualtrics. Utilizing an excel file that contained 810 emails of parents from this segment, provided by UNH Health Services, the survey was emailed to 810 email addresses on April 14, 2015. However, 28 emails failed to send from the list, and 4 emails sent turned out to be to parents who did not have a student enrolled in the SHBP. This leaves 778 emails that went out successfully, and were assumedly to those who do in fact have at least one student enrolled in the SHBP. The email that was sent out to recipients can be found in Appendix B. A copy this survey in can be found in Appendix C.

Reminder emails for this survey were sent on April 20<sup>th</sup>, 2015 and April 25<sup>th</sup>, 2015. In total, 107 surveys were opened and completed. This constitutes a response rate of 13.75%. The survey was closed to further responses on April 30, 2015.

## Results:

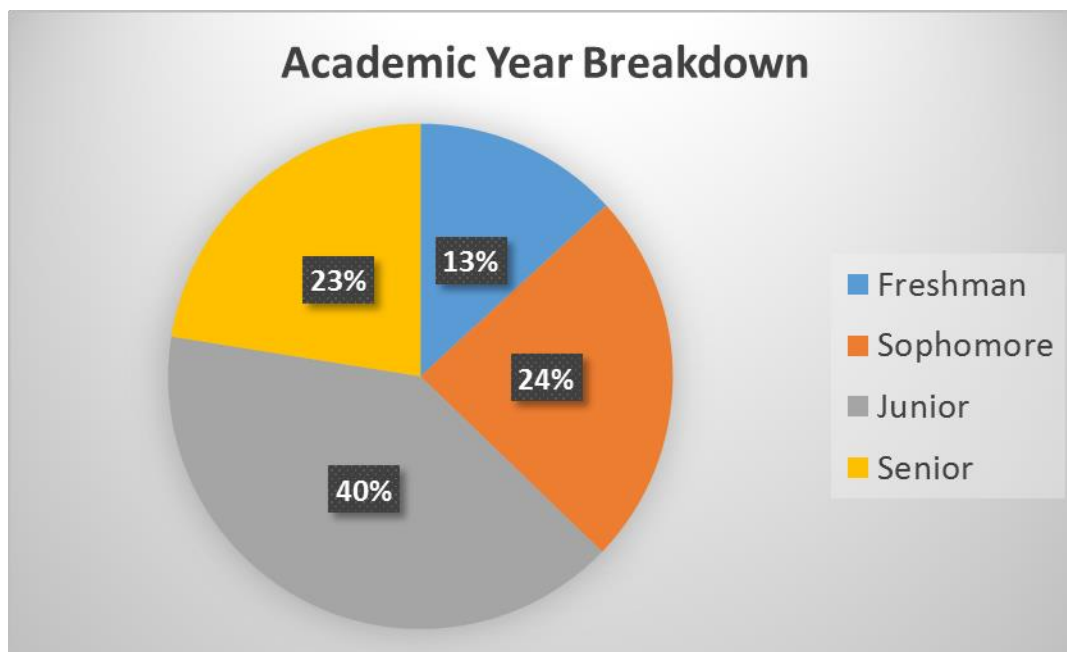
There are many results from each survey, as there were nearly a dozen questions on each, and some can be cross-tabulated with each other effectively.

### Student Survey Results:

It is important to note the demographics of students who took the survey. The two demographic characteristics that were examined were Academic Year and Academic Major. Age, sex, religion, home state, and other demographic characteristics were not sought out.

Foremost, the academic year of respondents. Of those that took the survey, 17 were freshmen, 31 were sophomores, 52 were juniors, and 29 were seniors. This can be seen below in Figure 2.

**Figure 2:** Academic Year Breakdown of Student Survey Respondents



There is a limitation here, in that the spread across academic years was not equal. The ideal spread of respondents would be 25% from each academic year. While sophomore and junior respondents are near this amount, junior respondents make up 40% of all respondents, compared to freshmen, who make up only 13% of respondents.

There was a spread of 37 academic majors among respondents, including double majors. A full list of the respondents' majors can be seen in Figure 3. All colleges were represented in respondents, but not equally. See Figure 4.

There is a limitation here as well: 28.7% of respondents were "Nutrition" majors, compared to most other majors, which constituted between 0.8% and 11.6%. This contributed to the fact that the College of Life Sciences and Agriculture (COLSA) represented 57% of respondents, compared to other colleges which comprised between 6% and 16% (for non-dual majors).



**Figure 3:** Major Breakdown of Student Survey Responses

Major	N	% of Total
Accounting	2	1.6%
Animal Science	1	0.8%
Biochemistry	2	1.6%
Biology	4	3.1%
Biomedical Science	8	6.2%
Business Administration	6	4.7%
Chemical Engineering	1	0.8%
Economics	1	0.8%
English	1	0.8%
Environmental Engineering	3	2.3%
Genetics	1	0.8%
Health Management and Policy	7	5.4%
Hospitality Management	2	1.6%
Human Development & Family Studies	1	0.8%
Information Technology	1	0.8%
Kinesiology	3	2.3%
Liberal Arts	3	2.3%
Linguistics	1	0.8%
Marketing	1	0.8%
Mechanical Engineering	1	0.8%
Music Performance	1	0.8%
N/A	4	3.1%
Nursing	1	0.8%
Nutrition	37	28.7%
Nutrition / Ecogastronomy	3	2.3%
Nutrition / Kinesiology	1	0.8%
Occupational Therapy	5	3.9%
Psychology	2	1.6%
Recreation Management and Policy	1	0.8%
Sports Studies	1	0.8%
Statistics	1	0.8%
Sustainable Agriculture and Food Systems	15	11.6%
Therapeutic Recreation	1	0.8%
Undeclared	3	2.3%
Zoology	3	2.3%
<b>Total</b>	<b>129</b>	<b>100.0%</b>

### Figure 4: College Breakdown of Student Survey Respondents

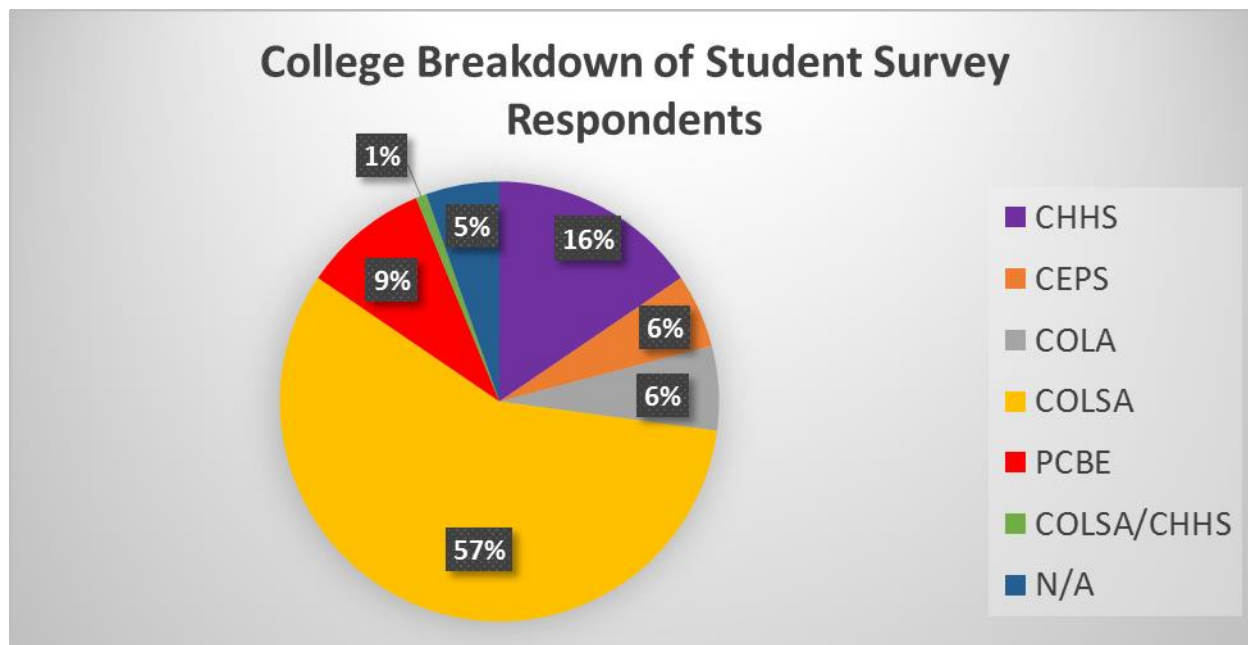


Figure 4: CHHS = College of Health and Human Services, CEPS = College of Engineering and Physical Sciences, COLA = College of Liberal Arts, COLSA = College of Life Science and Agriculture, PCBE = Peter T. Paul College of Business and Economics, N/A = No answer given.

In question 3 of the survey, respondents were asked to self-report their level of knowledge on healthcare topics. Their answers can be seen in Figure 5.

**Figure 5:** Table of Respondent Self-Reported Knowledge of Healthcare Topics

[illegible]

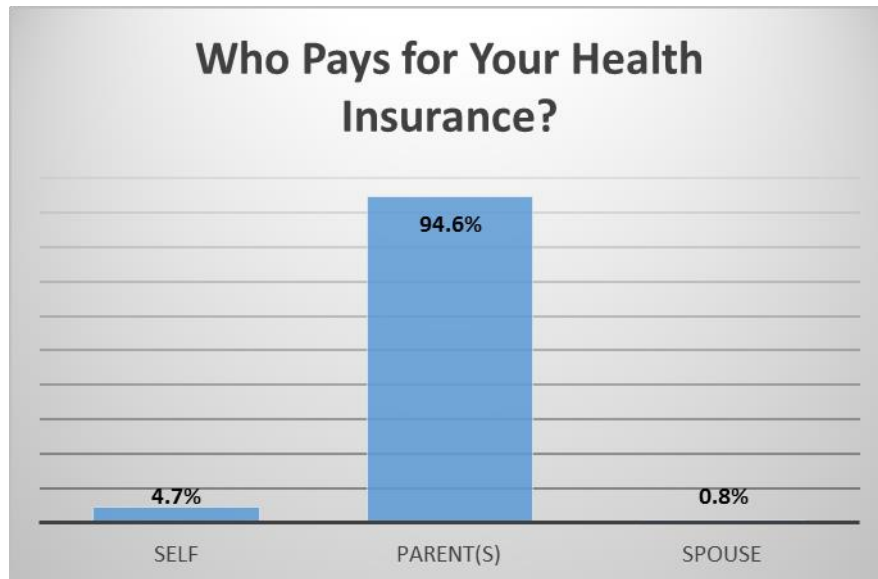
In question 4 of the survey, respondents were asked to self-report their level of knowledge on healthcare terminology. Their answers can be seen in Figure 6.

**Figure 6:** Table of Respondent Self-Reported Knowledge of Healthcare Terminology

Level of Knowledge	Co-Payment	Premium	Coinsurance	Deductible	Exclusions	Benefits	PPO	HMO	PCP	Referral	HIPAA	HDHP	Provider Network
No Answer	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.8%	0.8%	0.0%	0.8%	0.0%
No Knowledge	13.2%	24.0%	49.6%	10.9%	30.2%	4.7%	45.7%	50.4%	6.2%	11.6%	32.6%	48.8%	42.6%
Some Knowledge	43.4%	47.3%	38.0%	53.5%	52.7%	62.8%	38.8%	36.4%	34.9%	41.9%	35.7%	31.0%	45.7%
Extensive Knowledge	43.4%	28.7%	12.4%	35.7%	17.1%	32.6%	15.5%	12.4%	58.1%	45.7%	31.8%	19.4%	11.6%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

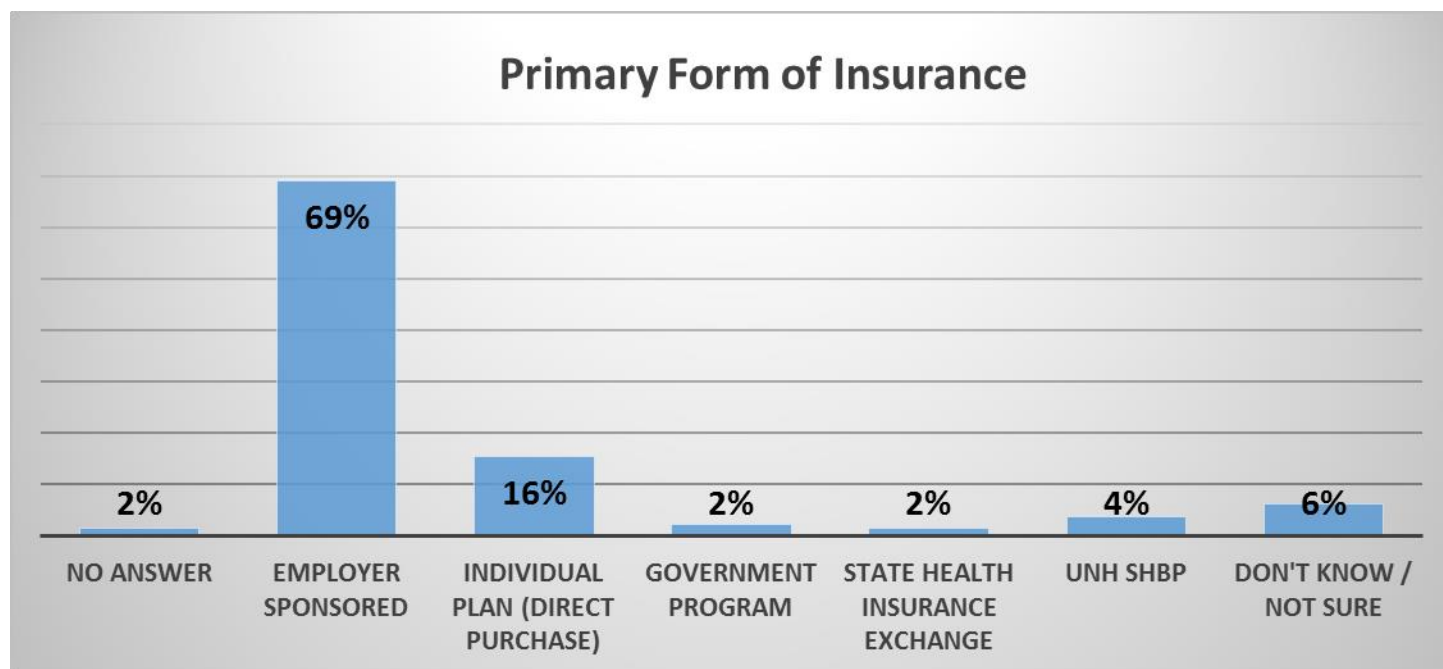
In question 5 of the survey, respondents were asked “Who currently pays for your health insurance?”. Their answers can be seen in Figure 7.

**Figure 7:** Who Currently Pays for Your Health Insurance?



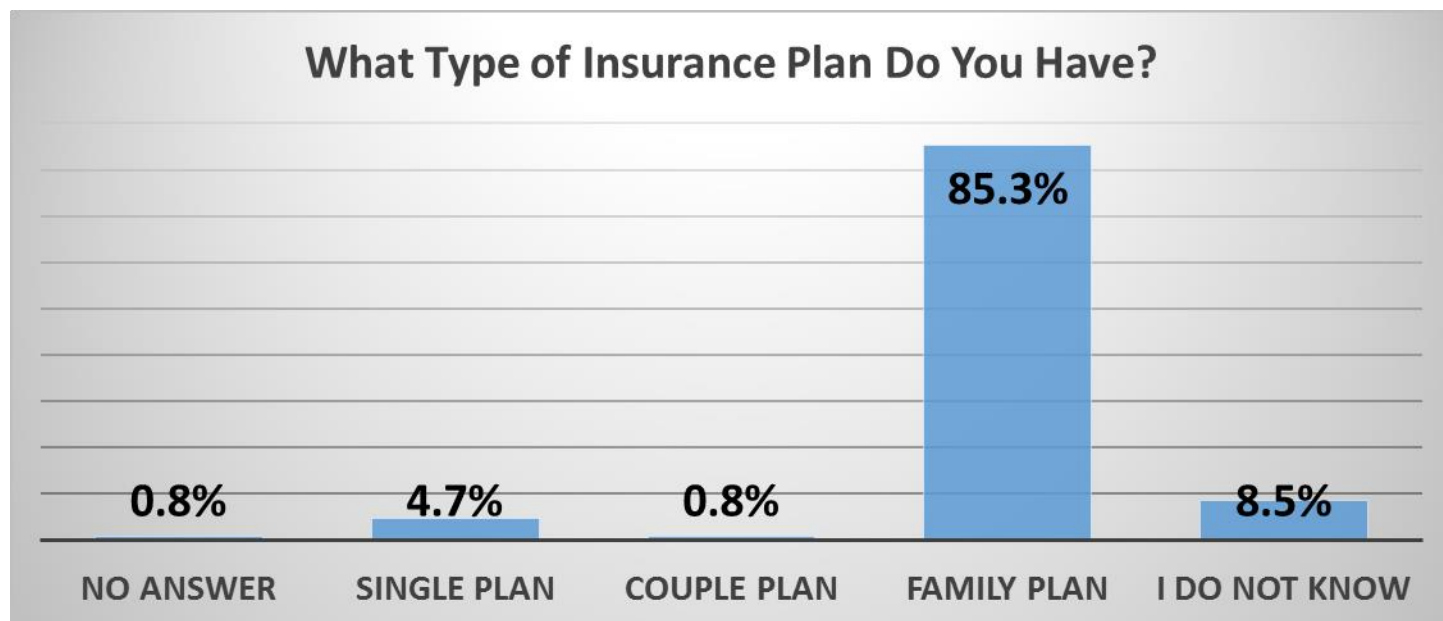
In question 6 of the survey, respondents were asked what their primary form of health insurance was. Their answers can be seen in Figure 8.

**Figure 8:** Respondent Primary Form of Health Insurance



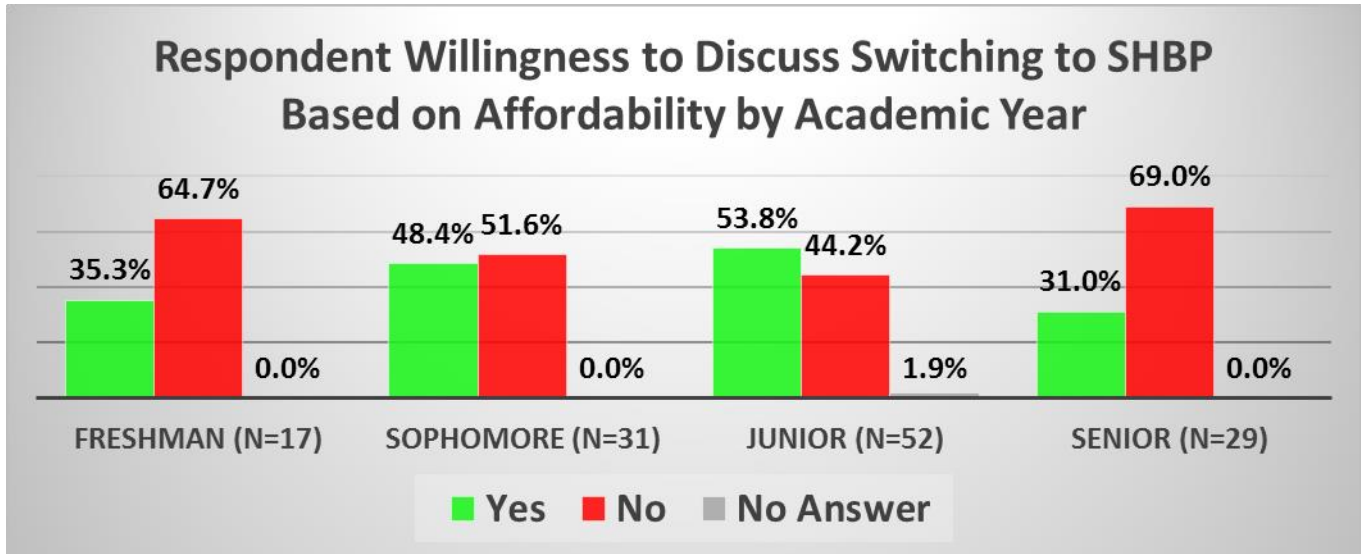
In question 7 of the survey, respondents were asked what type of health insurance plan they had (single, couple, family, Don't Know). Their answers can be seen in figure 9.

**Figure 9:** Respondent Type of Health Insurance Plan



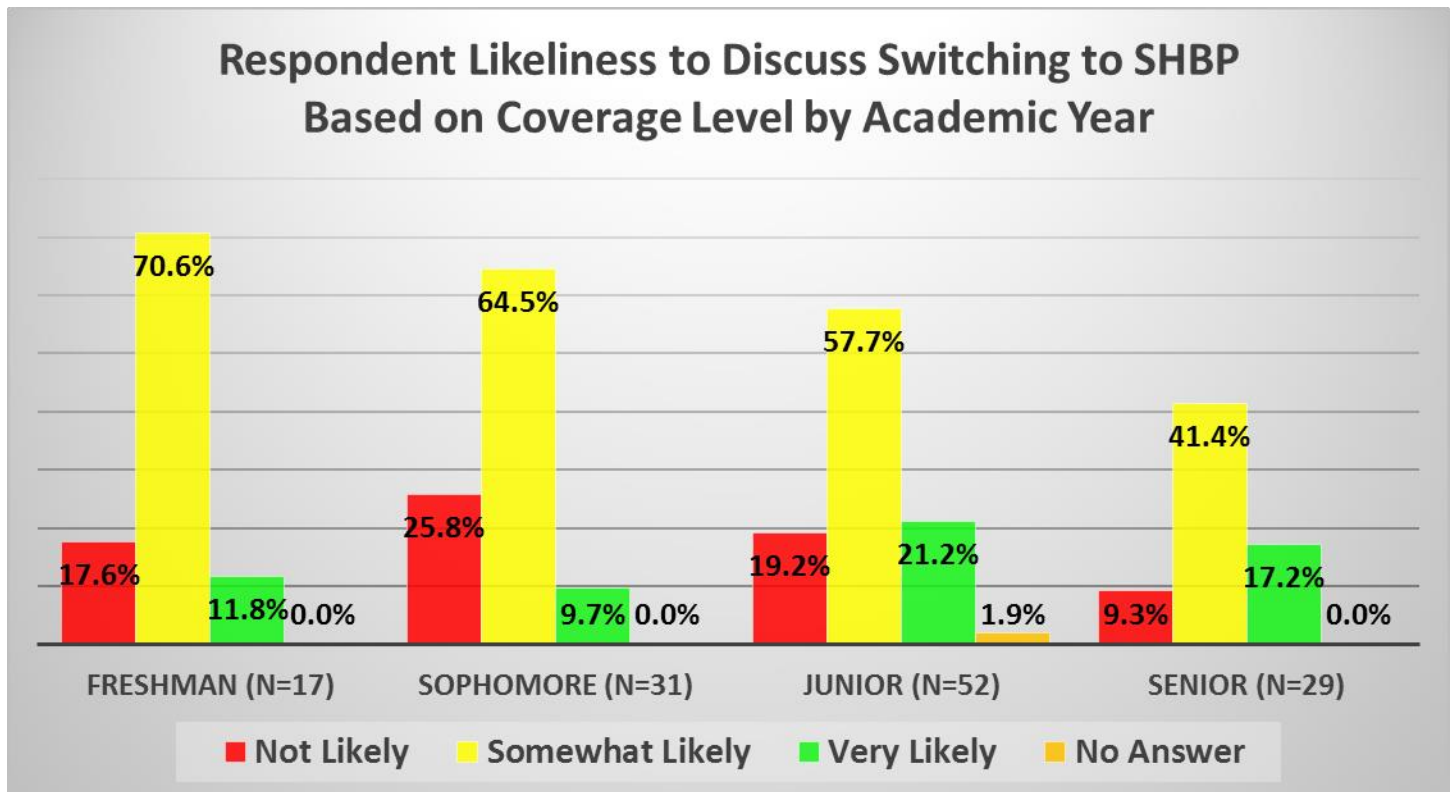
In question 8 of the survey, respondents were asked if they would discuss switching to the SHBP with their parents if they felt it were a more affordable option than their established insurance. Their answers, subdivided by academic year of the respondent, can be seen in Figure 10.

**Figure 10:** Respondent Willingness to Discuss Switching to SHBP Based on Affordability by Academic Year



In question 9 of the survey, respondents were asked how likely they would be to discuss switching to the SHBP with their parents if they felt it provided a better level of coverage than their established insurance. Their answers, subdivided by academic year of the respondent, can be seen in Figure 11.

**Figure 11:** Respondent Likelihood to Discuss Switching to SHBP Based on Coverage Level by Academic Year



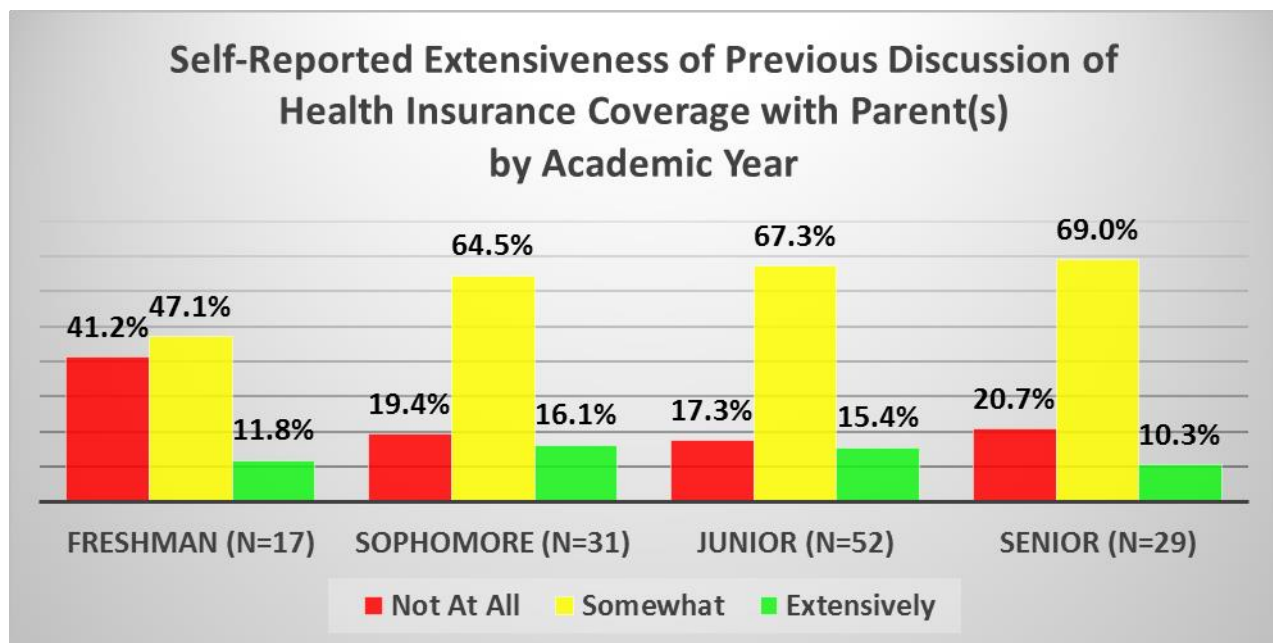
In question 10 of the survey, respondents were asked to self-report how important they felt certain aspects of health insurance were to them. Their answers can be seen in Figure 12.

**Figure 12:** Self-Reported Importance of Aspects of Health Insurance to Respondent

Level of Importance	I do not know this term	No Opinion	Unimportant	Important	Very important	No Answer	Total
Cost of Monthly Premiums	3.9%	5.4%	0.0%	45.0%	45.7%	0.0%	100.0%
Cost of Yearly Deductible	3.1%	5.4%	0.0%	42.6%	43.4%	5.5%	100.0%
Services Covered	2.3%	3.9%	0.0%	31.0%	62.0%	0.8%	100.0%
Dental Coverage	0.8%	5.4%	0.8%	41.9%	48.8%	2.3%	100.0%
In-Network Provider Base	24.0%	19.4%	0.8%	33.3%	18.6%	3.9%	100.0%
Out-of-Network Coverage	20.2%	20.2%	0.8%	37.2%	19.4%	2.2%	100.0%
Abroad / Out-of-Country Coverage	4.6%	29.5%	17.8%	34.1%	13.2%	0.8%	100.0%
Insurance Administrator	9.3%	34.9%	7.0%	39.5%	9.3%	0.0%	100.0%

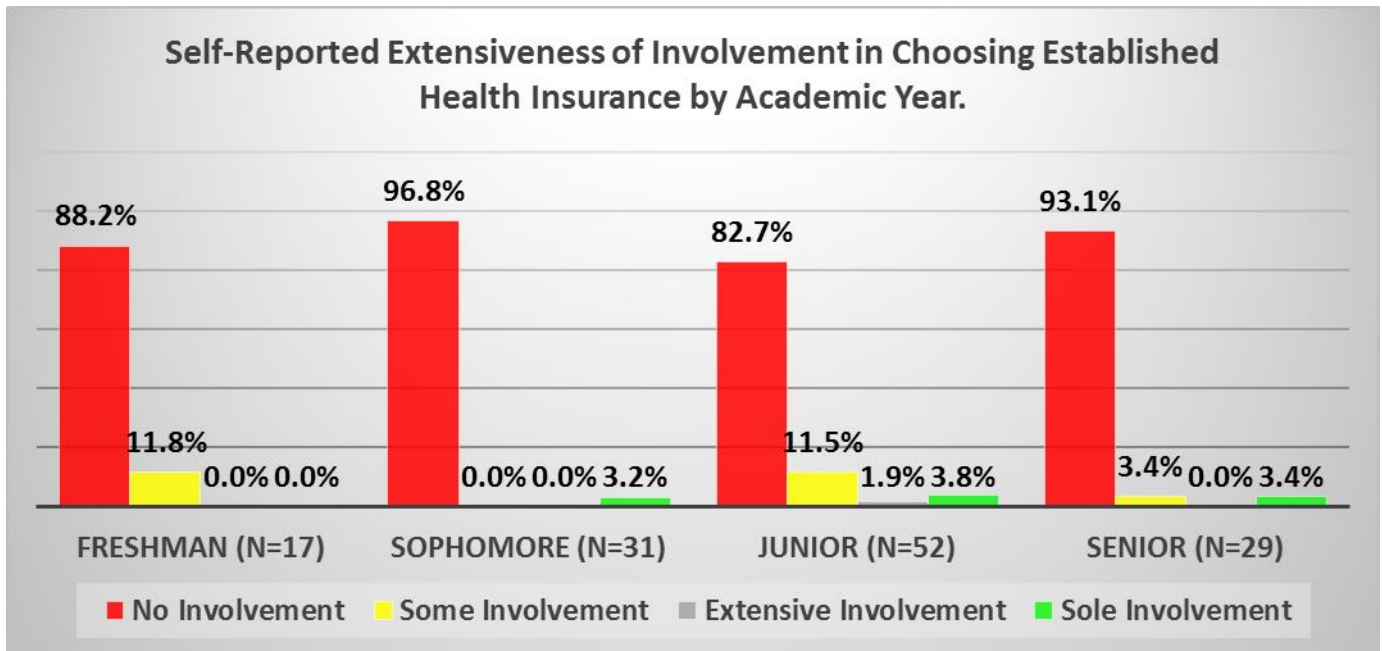
In question 11 of the survey, respondents were asked to self-report how extensively they had previously discussed health insurance coverage with their parent(s). Their answers, subdivided by academic year, can be seen in Figure 13.

**Figure 13:** Self-Reported Extensiveness of Previous Discussion of Health Insurance Coverage with Parent(s)  
by Academic Year



In question 12 of the survey, respondents were asked what degree of involvement they had in selecting their health insurance coverage. Their answers can, subdivided by academic year, be seen in Figure 14.

**Figure 14:** Self-Reported Extensiveness of Involvement in Choosing Established Health Insurance by Academic Year.



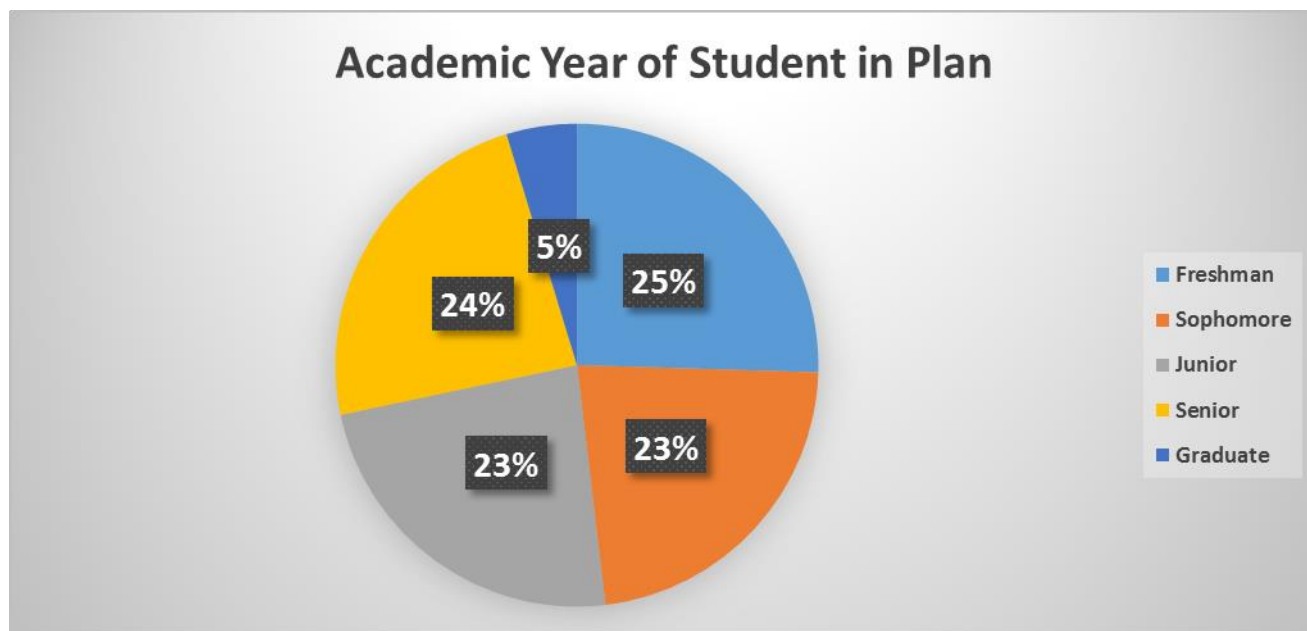
Finally, in question 15 of the survey, respondents were asked to comment on why they had the degree of involvement in selecting their health insurance coverage that they reported in question 12 of the survey. Their answers can be found in Appendix D.

### Parent Survey Results:

Unlike the student survey, demographic information was not sought from parents.

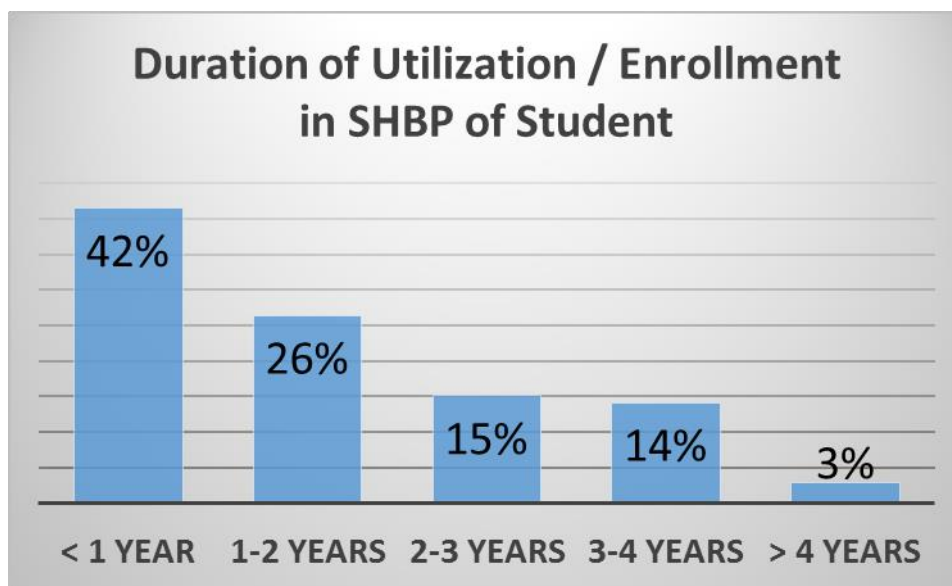
In question 1 of the survey, parents were asked what academic year their student was currently in. Their answers can be seen in Figure 15.

**Figure 15:** Academic Year of Student in SHBP



In question 2 of the survey, parents were asked how long their student had utilized / been enrolled in the SHBP. Their answers can be seen in Figure 16.

**Figure 16:** Duration of Utilization / Enrollment in SHBP of Student





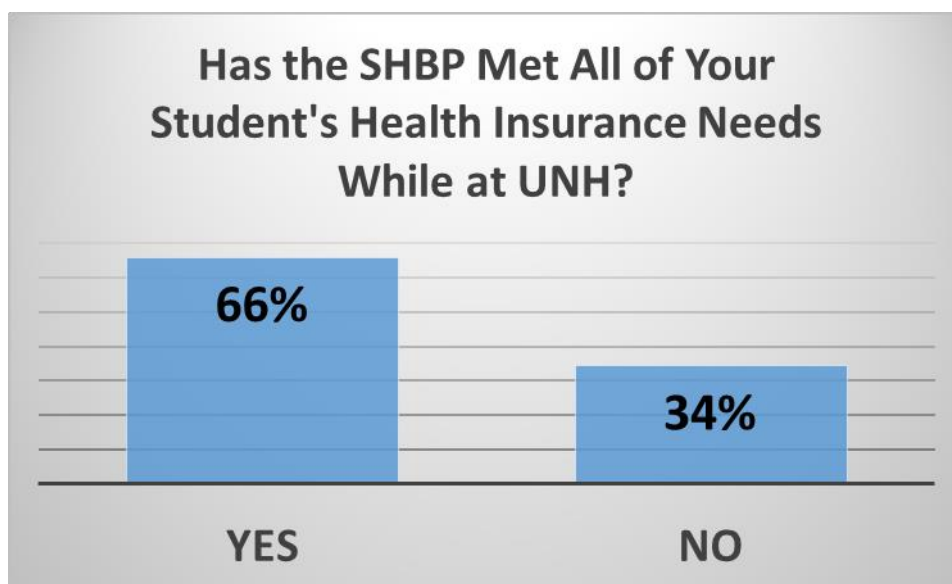
In question 3 of the survey, parents were asked what their overall level of satisfaction with the SHBP was. Their answers can be seen in Figure 17.

**Figure 17:** Overall Satisfaction Concerning SHBP



In question 4 of the survey, parents were asked if the SHBP had met all of their student's healthcare insurance needs during their time at UNH. Their answers can be seen in Figure 18.

**Figure 18:** Healthcare Needs Met by the SHBP



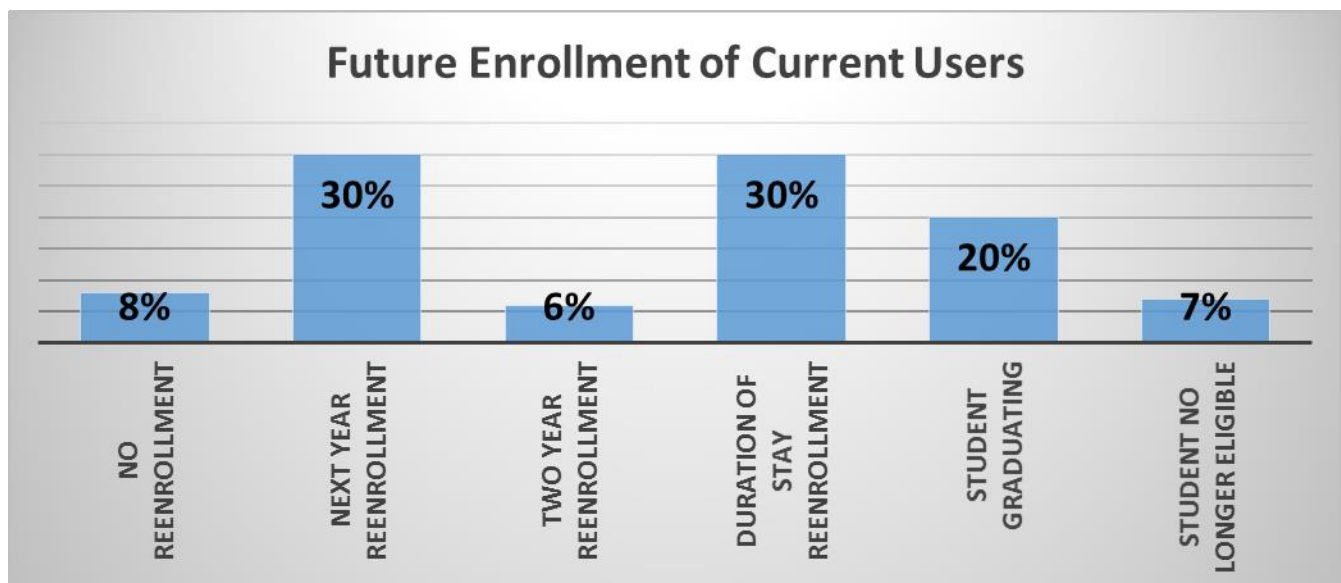
In question 5 of the survey, parents were asked to self-report their level of satisfaction with certain aspects of the SHBP. Their answers can be seen in Figure 19.

**Figure 19:** Self-Reported Satisfaction with Aspects of SHBP

Question	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	Total
Cost of Monthly Premiums	5%	13%	38%	30%	13%	100%
Cost of Yearly Deductible	4%	10%	37%	35%	15%	100%
Cost of Co-payments and Coinsurance	3%	9%	37%	37%	15%	100%
Services Covered	3%	13%	27%	46%	12%	100%
Basix Dental Savings	9%	10%	65%	14%	2%	100%
Pharmaceutical Coverage	7%	13%	32%	37%	12%	100%
In-Network Provider Base	3%	7%	40%	38%	13%	100%
Out-of-Network Coverage	3%	6%	59%	28%	4%	100%
Abroad / Out-of-Country Coverage	2%	5%	71%	15%	6%	100%
Insurance Administrator	6%	5%	54%	29%	6%	100%

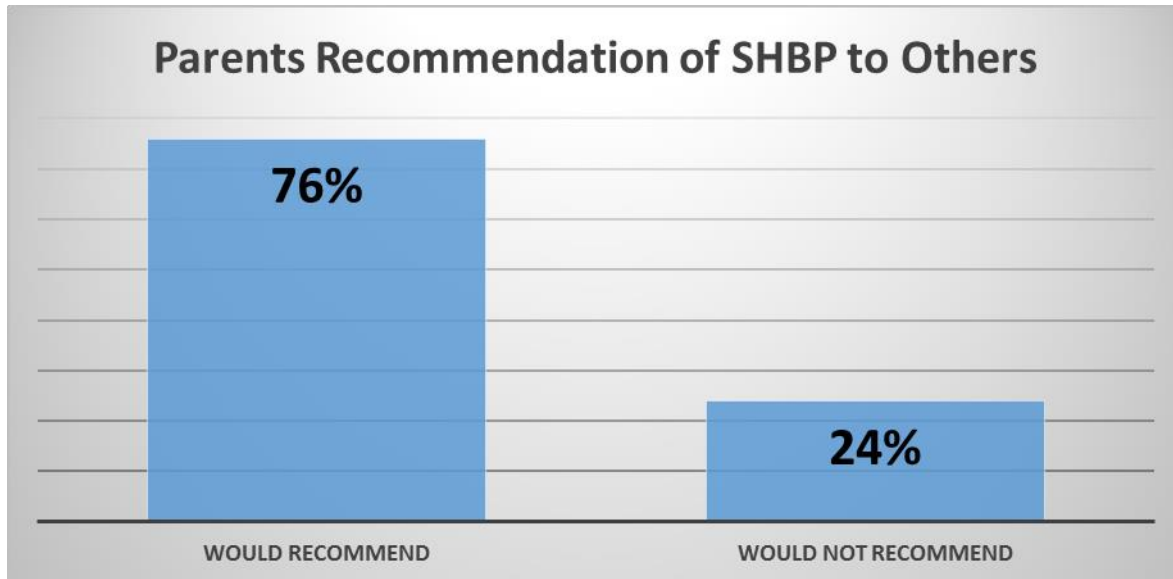
In question 6 of the survey, parents were asked what their plans for future reenrollment of their student in the SHBP plan were. Their answers can be seen in Figure 20.

**Figure 20:** Self-Reported Future Reenrollment Plans for Student in SHBP.



In question 7 of the survey, parents were asked whether or not they would recommend the SHBP to others. If they reported that they would not recommend the service to others, they were asked to provide a comment as to why. These comments can be found in Appendix E. It should be noted that some respondents added a comment even if they answered “Yes” to this question; These answers are included in Appendix E. Respondent answers, sans-comment, can be seen in Figure 21.

**Figure 21:** Parent Recommendation of SHBP to Others



In question 8 of the survey, parents were asked how strongly they agreed / disagreed with certain statements that had to do with the causation of enrolling their student in the SHBP. Their answers can be seen in Figure 22.

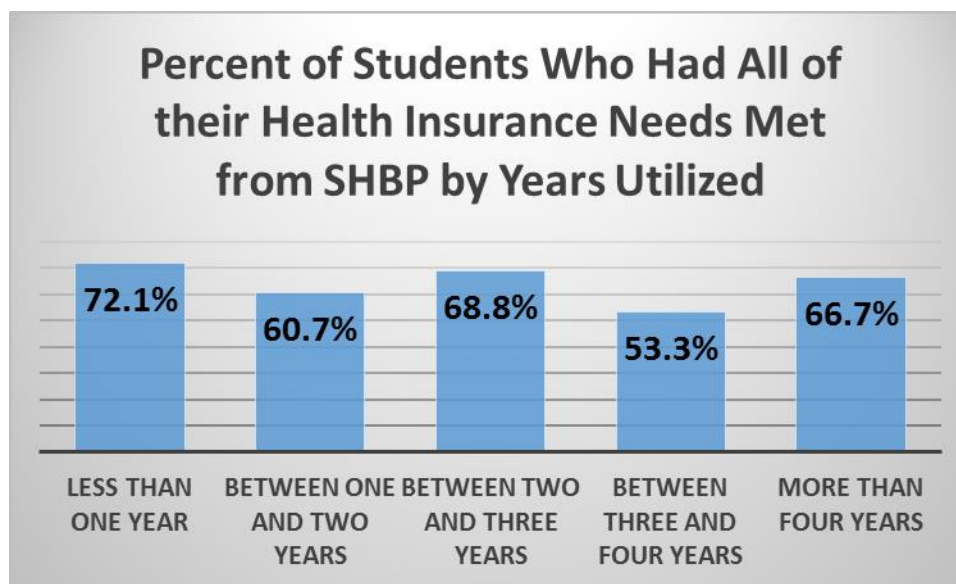
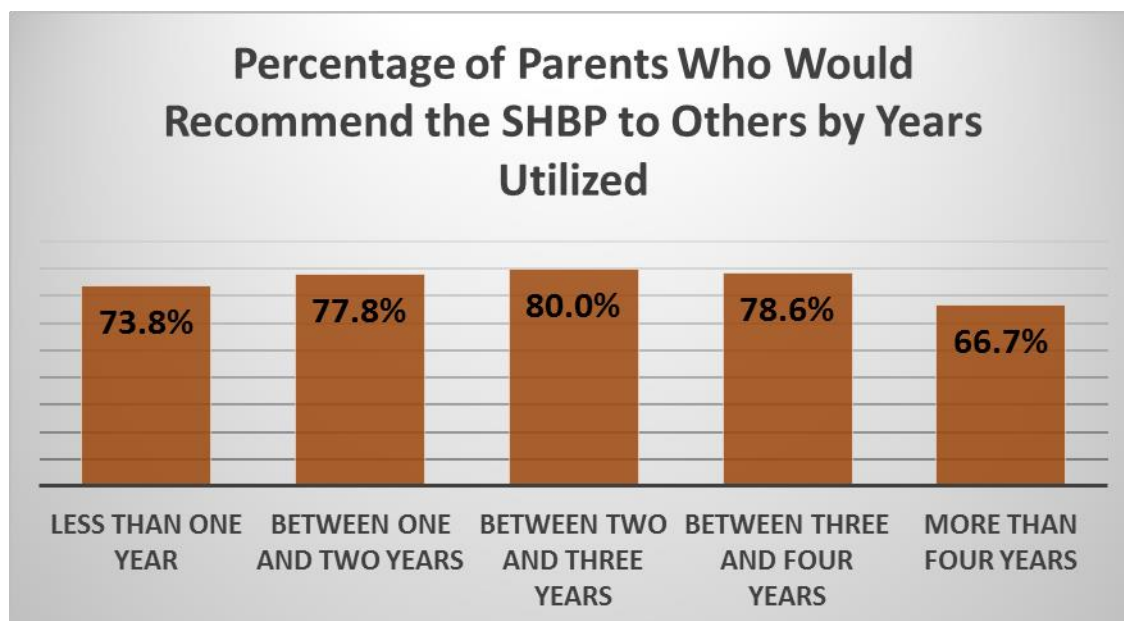
**Figure 22:** Agreement with Statement Concerning Causation of Enrollment of Student in SHBP

Question	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Total
My student would have otherwise been uninsured	22%	13%	9%	28%	29%	100%
SHBP was less expensive than other insurance options	19%	32%	27%	13%	9%	100%
SHBP supplements other coverage because the cost is relatively inexpensive	8%	17%	40%	18%	18%	100%
I purchased SHBP to supplement a high deductible health plan	3%	3%	23%	29%	42%	100%
My student was enrolled in the SHBP because the waiver deadline was missed.	0%	1%	19%	25%	55%	100%

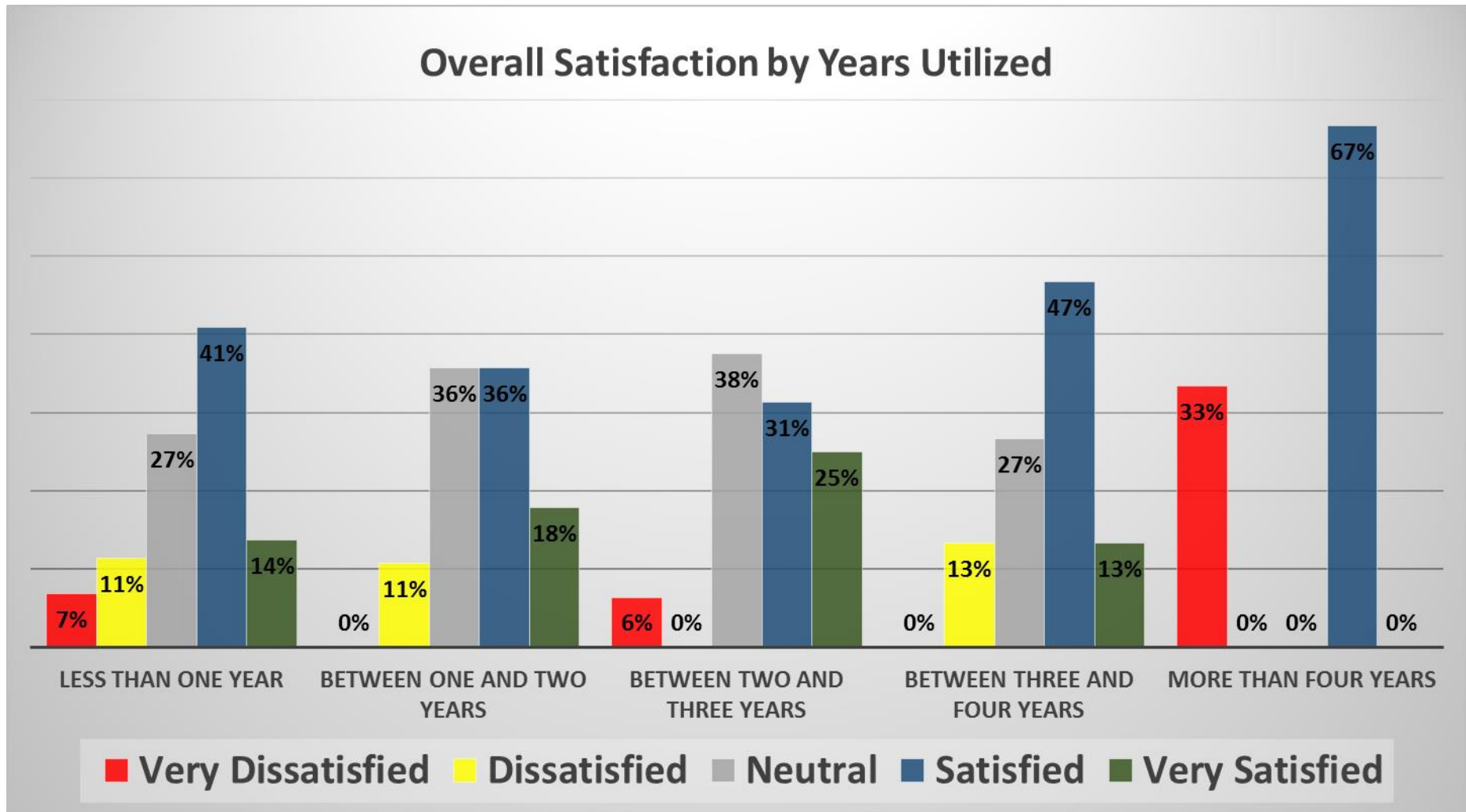
In question 9 of the survey, parents were asked to comment on why they enrolled their student in the SHBP. Their answers can be found in Appendix F.

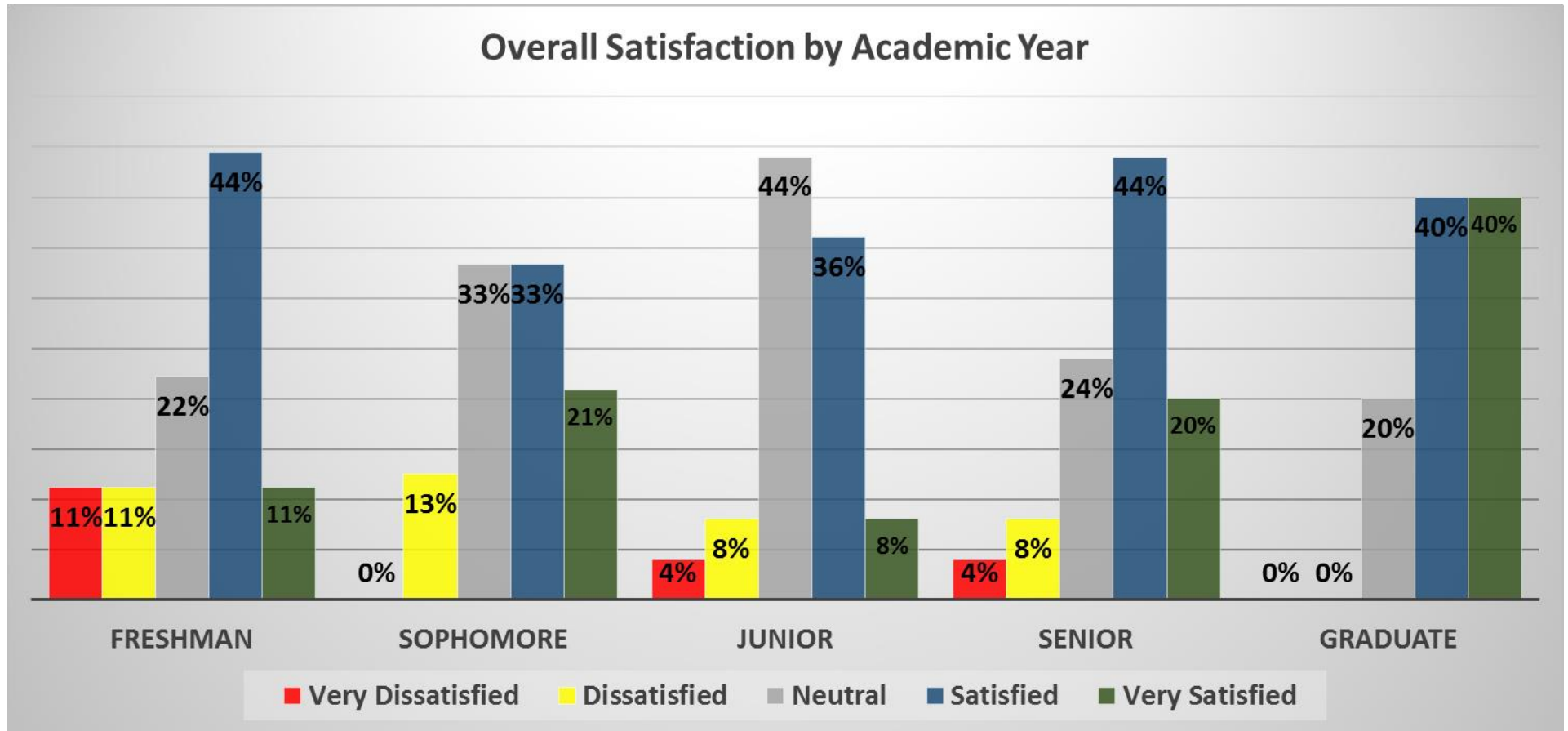
In question 10 of the survey, parents were asked how they thought the SHBP could be improved, other than reducing costs. Their answers can be found in Appendix G.

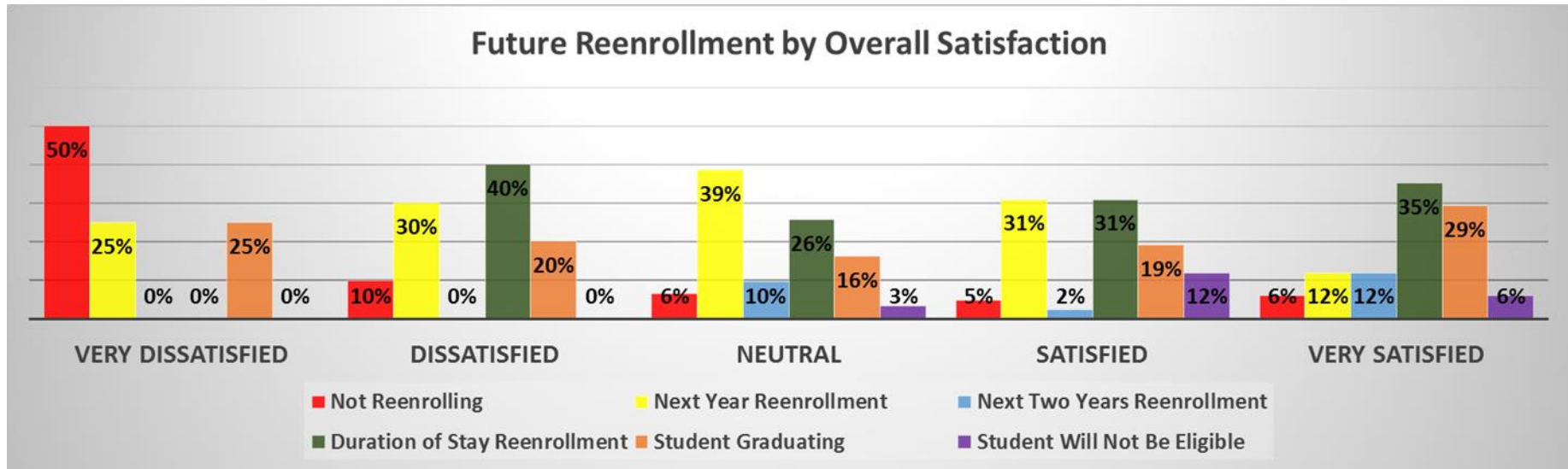
Cross-tabulations of selected questions from the parent survey were also performed.

**Figure 23:** Cross-tabulation of Needs Met and Years Utilizing Plan**Figure 24:** Cross-tabulation of Recommendation to Others by Years Utilizing Plan

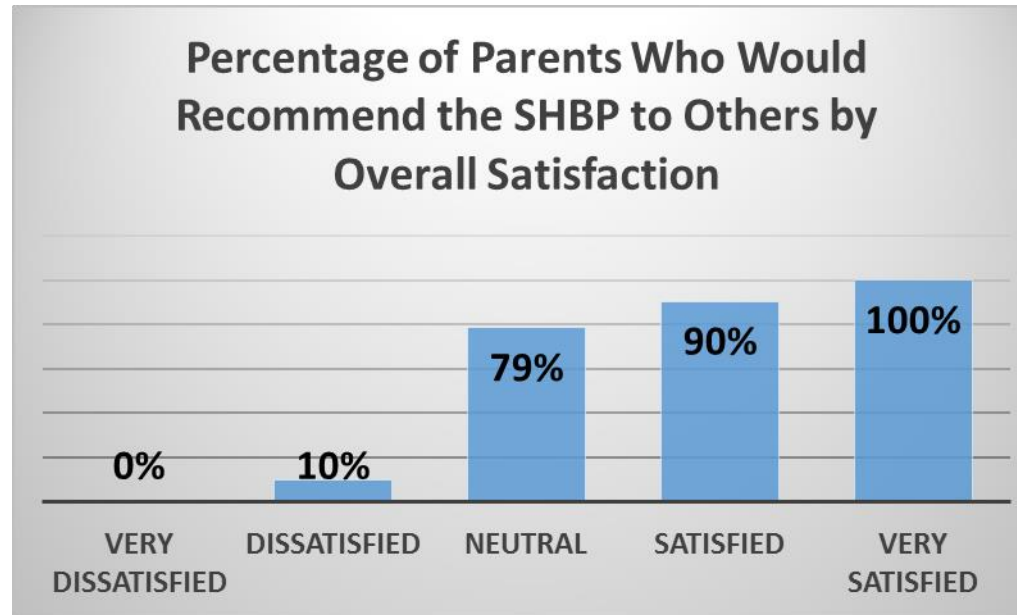
**Figure 25:** Cross-tabulation of Overall Satisfaction by Years Utilizing Plan



**Figure 26:** Cross-tabulation of Overall Satisfaction by Student Academic Year

**Figure 27:** Cross-tabulation of Future Reenrollment by Overall Satisfaction

**Figure 28:** Cross-tabulation of Parent Recommendation to Others by Overall Satisfaction



This graph shows only those who answered “Yes” when asked if they would recommend the SHBP to others.



## Discussion:

The purpose of this study was to determine what the current attitudes, perceptions, and beliefs were of both current UNH undergraduate students, and parents of students who were utilizing the SHBP. The use of this information is to help develop a marketing campaign to further the enrollment and utilization of the SHBP on the UNH campus in the future.

First, limitations of the study must be addressed:

- Some of the student respondents knew the researcher personally before being administered the survey. These students were in the classes surveyed without prior knowledge to the researcher. Approximately 5 respondents had a previous personal relationship to the researcher.
- A significant portion of student respondents were from the Nutrition and major, making up ~28.7% of all student respondents. This is compared to other majors, which made up between 0.8% 11.6% of the total respondents. The second highest segment of student respondents were from the Sustainable Agriculture and Food Systems major. This made up 11.6% of the student respondents. See Figure 3 and 4.
- Since the Nutrition and Sustainable Agriculture and Food Systems majors are both from the College of Life Sciences and Agriculture (COLSA), and other majors from COLSA were also represented, a larger percentage of student respondents were from this college. Approximately 57% of all student respondents were represented COLSA. See Figures 3 and 4.
- The colleges represented overall as percentages of student respondents is not equal or representative of the overall student population. See Figures 3 and 4.
- There was not a representative percentage of student respondents for each academic year. Where a 25% split for each academic year, or a split based on portion of the student body would be preferred, there was a greater percentage of juniors represented, and a smaller percentage of freshmen represented among respondents. See Figure 2.
- The student survey only gathered 129 responses. This is not a large sample size, and may not be representative of the UNH undergraduate student body.
- The parent survey garnered a 13.5% response rate. This may not be a large enough sample size to fully represent the data available from the segment.

As for the results of the study, it is important to first determine what the data shows about the segments in terms of how effective any marketing effort would be towards them. It is already known that marketing towards parents is effective, as they are the ones who traditionally provide health insurance to their children while in college. However, it was important to see how much involvement or interest students took in their health insurance coverage, or how much they even knew about it.

The results show that most students have “No Knowledge” or “Some Knowledge” of the healthcare insurance topics presented, and at most 15.5% have “Extensive Knowledge” of any of the topics (See Figure 5). This presents two potential conclusions: undergraduate college students are not well-informed of healthcare insurance topics, and there is a definite opportunity for education on these topics for these students. Contrasting to the healthcare insurance knowledge most students have, knowledge of healthcare terminology such as “Premium”, “PPO”, “Insurance Administrator”, and “PCP” is varied (See Figure 6). This again shows that students are generally not well-informed about the health insurance industry and the terms used within it. Along with this, when asked what level of involvement students had in selecting their health insurance, approximately 90% of students reported that they had “No Involvement” in choosing their health insurance (See Figure 13).

Many respondents' reasoning for this level of involvement was simply that their parents normally had full control of their health insurance coverage, or that they had no choice in getting a different plan based on their parents employer-sponsored insurance (See Appendix D). Along with this, 94.6% of respondents said that their parents pay for their health insurance, and that 69% of respondents' health insurance is an employer-sponsored plan (See Figures 7 and 8). However, 45% of students said they would discuss switching their insurance to the SHBP with their parents if they felt it were a more affordable option (See Figure 10). When asked how likely students would be to discuss the switch if they felt the SHBP provided better coverage, ~25% said they would be "Not Likely" to do so, while ~58% said they would be "Somewhat likely" to do so, and ~17% said they would be "Very likely" to do so (See Figure 11).

From this data, it can be shown that there may be some value in marketing the SHBP specifically towards undergraduate students, but not an immense amount. Though some students would be willing to discuss switching to the SHBP with their parents, it is not guaranteed that they actually would, and how much effort they would put into doing so is unclear. Students take little involvement in choosing their health insurance coverage, and even fewer have any control over it if they do have involvement. Therefore, this study is not suggesting towards UNH Health Services that students be part of future marketing attempts for the SHBP.

One hundred and seven parents were surveyed in this study through the online survey. Their answers may be more useful to UNH Health Services, as they tend to be the ones who are already involved in the insurance process, and tend to have much more experience with it than do undergraduate college students.

The academic year breakdown of the students of parents in the survey was close to ideal. With all years being close to 25% of the total respondents, save for graduate students which made up only 5% of the respondents (See Figure 15). This, along with the time that parents have utilized the SHBP with their student, helps give a good picture of what is going on with perceptions, attitudes, and beliefs of the plan. Figure 16 shows how long respondents have utilized the plan. 42% have utilized it for less than a year, 26% have used it for between one and two years, 15% for between two and three years, 14% for between three and four years, and 3% for more than four years. While it would be better to have a more even spread among the years utilized, the data is workable and does help show how long those in the plan stay in it (Though this may be due simply to the likelihood of respondents to answer based on the amount of years they have utilized the plan).

Parents seem to be relatively satisfied with the plan: 40% reported that they are "Satisfied" with the plan, and 16% report that they are "Very Satisfied". With 30% reporting they feel "Neutral" and 9% being "Dissatisfied" and only 5% being "Very Dissatisfied", it seems that the SHBP is doing well keeping parents satisfied with the plan overall (See Figure 17). When asked how satisfied with specific aspects of the plan parents were, tended to be close to the overall satisfaction rates (See Figure 19):

- Premiums: 44% "Satisfied" or "Very Satisfied" vs 18% "Dissatisfied" or "Very Dissatisfied"
- Deductible: 50% "Satisfied" or "Very Satisfied" vs 14% "Dissatisfied" or "Very Dissatisfied"
- Co-Payments & Co-Insurance: 52% "Satisfied" or "Very Satisfied" vs 12% "Dissatisfied" or "Very Dissatisfied"
- Services Covered: 58% "Satisfied" or "Very Satisfied" vs 18% "Dissatisfied" or "Very Dissatisfied"
- Basix Dental Savings: 16% "Satisfied" or "Very Satisfied" vs 19% "Dissatisfied" or "Very Dissatisfied"
- Pharmaceutical Coverage: 49% "Satisfied" or "Very Satisfied" vs 20% "Dissatisfied" or "Very Dissatisfied"
- In-Network Provider Base: 51% "Satisfied" or "Very Satisfied" vs 10% "Dissatisfied" or "Very Dissatisfied"

- Out-of-Network Provider Base: 32% “Satisfied” or “Very Satisfied” vs 9% “Dissatisfied” or “Very Dissatisfied”
- Abroad / Out-of-Country Coverage: 21% “Satisfied” or “Very Satisfied” vs 7% “Dissatisfied” or “Very Dissatisfied”
- Insurance Administrator: 35% “Satisfied” or “Very Satisfied” vs 11% “Dissatisfied” or “Very Dissatisfied”

Notably different from the overall satisfaction rates are Basix Dental Savings, Out-of Network Provider Base, Abroad / Out-of-Country Coverage, and Insurance Administrator. Though significantly in respondents satisfied, these aspects are also significantly lower in respondents dissatisfied, save for Basix Dental Savings. Basix Dental Savings has only a 16% satisfaction rate, with a 19% dissatisfaction rate – This may indicate that this aspect of the plan should be improved, as respondents tended to be more neutral on how they felt about this aspect of the plan than other aspects.

Figure 23 shows how respondents reported that the SHBP met all of their students healthcare insurance needs while at UNH, compared to how many years they have utilized the plan. At 72.1% for the first year, going down to 60.7% the second year, and 68.8%, 53.3% and 66.7% for the following years, it seems that the SHBP needs some improvement. With more than 25% of respondents not having all of their health insurance needs met by the SHBP, it will be important to analyze these needs that are not being met in future surveys and research.

Figure 24 shows what percent of respondents would suggest the SHBP to others, based on how many years they have utilized the plan. Hovering around approximately 76% (See Figure 21), it seems that the amount of time respondents utilize the plan does not change their likelihood to recommend the plan to others. This number seems more closely related to if respondents health insurance needs were met, which tended to be approximately 66% of all respondents (See Figure 18) and to overall satisfaction, which tended to be approximately 56% that were at least “Satisfied” (See Figure 17).

Figure 25 shows how overall satisfaction is related to the amount of years respondents have utilized the plan. Satisfaction levels seem to be consistent across years utilized, save for “More than 4 years”; However, this may be due to the small portion of respondents who answered “More than 4 years” (3% of respondents).

Figure 26 shows how overall satisfaction is related to the academic year of the respondent’s child. It seems that academic year does not have a major impact on overall satisfaction, as the only major change occurs for Juniors, where the rate of those who are “Very Satisfied” drops down to 8% from the previous year, and the amount who are “Neutral” in satisfaction jumps to 44%.

Figure 27 shows how overall satisfaction relates to future reenrollment within the SHBP. It can clearly be seen for those who are “Very dissatisfied”, there is a 50% chance that future reenrollment in the plan will not occur, but 25% say they will reenroll for at least the next year. This is logical, as clearly these respondents are not getting what they need/want from the plan, but may have no choice, at least for the next year. Those who are “Dissatisfied” with the plan are much more likely to keep their student enrolled in the plan, with only 10% in this satisfaction bracket not reenrolling in the future, but with 40% reenrolling for the duration of their students’ time at UNH, and 30% reenrolling for at least the next year. Those who feel “Neutral” about the plan seem that they will be keeping their student in the plan for at least the next year, with some staying for the next two years, and 26% even staying for the duration of their time at UNH. The rates of reenrollment for those who are “Satisfied” or “Very Satisfied” with the plan do not differ much from those who are “Neutral”. It seems that keeping students and parents at least “Neutral” about the plan will yield the most reenrollment in the future.

Figure 27 does show how satisfaction relates to future reenrollment, but what about new enrollment? Figure 28 shows what percentage of parents would recommend the SHBP to others based on their satisfaction levels. It is not surprising that 0% of those who are “Very Dissatisfied” and only 10% of those who are “Dissatisfied” would recommend the plan. However, when satisfaction levels reach “Neutral”, 79% of respondents would recommend the plan. This jumps further to 90% when satisfaction reaches “Satisfied”, and 100% when satisfaction reaches “Very Satisfied”. This shows that the satisfaction of parents and students has a major impact on if they would recommend the plan to others – something that may be very useful when marketing.

With all of this data in mind, the third part of this study must be considered: The marketing campaign.

## Marketing Campaign:

### Marketing Campaign Objectives:

**Behavioral Objective:** Have at least 750 more parents enroll their child in the SHBP (a 37.5% increase)

**Knowledge Objective:** Increase UNH parent awareness of the SHBP and the benefits of utilizing it over their established health insurance for their student

**Belief Objective:** Have 7,500 (approximately half of the student populations’ parents) believe that the SHBP *may* be a better, more affordable health insurance plan than their established plan.

### Marketing Campaign Target Segments:

- Parents of current and incoming only-child students currently utilizing a 3-person family health insurance plan who do not have a child enrolled in the SHBP.
  - Services has found that, in general, the cost of a family plan with one child and two adults is greater than the cost of a two-person plan with one child on the SHBP.
- Parents whom have an incoming student, whose established health insurance is an out-of-state Medicaid plan.
  - UNH does not accept out-of-state Medicaid to meet the health coverage requirements, so the SHBP can provide an option for students on these plans other than buying an insurance plan directly from an insurance company or buying a plan off of the state health exchange. As these students and their families tend to be less affluent, it is less likely they would be able these options.
- Parents whom are self-employed whom do not have a child enrolled in the SHBP.
  - Parents whom are self-employed are likely getting their students health insurance directly from an insurance company, or through the state health exchanges. Without an employer-contribution put towards paying for their insurance, it is likely it would be less expensive for these parents to have their student enrolled in the SHBP.
- Parents whom currently have a current student enrolled in the SHBP, but whom are not satisfied with the plan.
  - Increasing the satisfaction of current enrollees and their parents is always important, and is part of any good business / marketing model.
- Parents of current or incoming students whom currently get their students’ health insurance through the state health exchange.

- Again, the SHBP is more affordable in general than the NH State Health Exchange Plans (See Figure 1).

How can these segments be targeted efficiently? Foremost are those who would otherwise purchase their student's health insurance directly from the State Health Exchange, or directly from an insurance company. With the segments in which this is a major factor, cost and coverage are the main factors for choosing a plan. While the SHBP does not provide the best coverage of services geographically, as it is restricted to the Durham area and areas within relative driving distance of it, it does provide coverage for physician visits, pharmacy, emergency visits, and continuing care. This makes it competitive with other plans on the marketplace. Along with this is the competitive cost of care associated with the SHBP. As has been shown in Figure 1, the SHBP is significantly more affordable than other plans on the State Health Exchange, mainly due to having a \$0 yearly deductible. While co-insurance and copayment amounts could not easily be calculated and averaged across all plans offered at the time, an average "cents on the dollar" covered amount is known for each category of plan. With the SHBP covering 80c on the dollar of all costs, putting it on par with a gold plan, but having a monthly premium on average \$8 less than bronze plans, and a deductible equal to platinum plans, the SHBP is by far the cheapest option. To a price-sensitive market, it is extremely critical to stress this when marketing the plan.

As for the segment of parents who have a 3-person family plan, Health Services has found that it tends to be less expensive for families to instead have a couple-plan and have their child on the SHBP during their time at UNH. However, this may be difficult to do, as couple-plans are becoming less common of an option for employer-sponsored insurance plans. For those that do have an option for a couple-plan, however, the SHBP would be a great plan to make the segment aware of.

Parents who are currently dissatisfied with the plan are always a concern. With 50% of those who are "Very Dissatisfied" refusing the reenroll their student in the plan for the next academic year, it is important to ensure that their concerns are addressed to keep their students enrolled in the future, as well as to better the reputation and word-of-mouth marketing that comes from these parents.

This gives us three main points to make in our marketing campaign: Affordability and coverage of the plan versus Direct-Buy plans or State Health Exchange plans, affordability of the plan versus 3-person family plans, and customer service and plan betterment. For the first two points, the issue is a matter of transmitting information effectively and efficiently to ensure that potential enrollees are made and kept aware and informed of the benefits of switching to the SHBP. The third point is an issue of increasing communication with current enrollees, and implementing a system in which their concerns can be heard and addressed.

What options are there for marketing information on the plan to our segments? Foremost, we must look at how the SHBP already markets itself. The SHBP already has a small booklet available, and it is very informative of individual costs and structure. What it does not do is explain or emphasize why it should be chosen over other insurance plans. It does currently utilize the slogan "A gold plan at a bronze price", but this is hidden in the first page of the letter to parents. As a marketing material, the booklet is ineffective. For somebody who is already interested in the plan and wants more specific information, it is great. The problem is making potential enrollees aware of the plan and interested enough to get to that booklet and sit down with it. The SHBP also has a few pages on the UNH website which discuss it (<http://www.unh.edu/health-services/shbp/>). The site does a good job explaining what the plan is, as well as some of its benefits. It also answers some specific and frequently asked questions about the plan. Again, however, this page is not likely to be seen by prospective enrollees unless they have already heard of the plan or have had some interest in it sparked. New marketing materials need to be developed in order to breed widespread knowledge and interest in the plan.

These new materials should have a more universal slogan, as the current one only addresses the segment who would otherwise utilize a plan from the State Health Exchange. Before a slogan can be developed, a logo should be created that the slogan can be attached to. This is common with many businesses. For example, anywhere that Wal-Mart shows their logo, it is accompanied by their slogan “Save Money. Live Better”. This helps consumers to associate the company with the slogan’s words and the company’s logo. Wal-Mart’s slogan helps its consumers associate the company and its logo with exactly what it says: saving money and having a better life.

Below are some suggested logos that could be used and modified to fit the needs of UNH Health Services:



**Student Health  
Benefits Plan**

Below are some suggested slogans that could be used and modified to fit the needs of UNH Health Services:

- Affordable Health at Your Home Away from Home
- Keeping Your Wildcat Strong
- Keeping Your Wildcat Going
- Affordable Health for the Wildcat In You
- For Affordable, Reliable Health
- More Than Health
- Parent Recommended, Wildcat Strong
- Wildcat Strong, All Year Long

On a more extreme level, Health Services could consider changing the name of the plan altogether. The “Student Health Benefits Plan” conveys the information it needs to, but it does not feel connected to UNH. Some alternative names that could be considered:

- Wildcat Health Plan
- Wildcat Wellness Plan
- University Wellness Plan

Once a logo, slogan, and potentially a new name are picked for the plan, the information needs to be disseminated. Since we are targeting parents of both incoming and current students, we must find a way to reach them all without expending too many resources. Since students must waive or enroll in the SHBP each year, it may be a good idea to require that the waiving process include a walkthrough of the SHBP to show understanding of the plan and what it entails in terms of costs, coverage, requirements, etc. Along with this, near the time when waiving or enrollment in the plan occurs, a video may be considered. This video should include testimonials from parents who are satisfied with the plan, and have had significant interaction with Health Services through the plan to discuss how it has helped them. The plan should also discuss the comparative and competitive pricing of the plan compared to the State Health Exchanges and hit on all of the marketing points mentioned earlier. The SHBP should also become more prevalent in marketing materials towards matriculated students. It should not be a topic which only comes up when the enrollment / waiver period arrives, but one which is discussed months in advance so that adequate time for discussion and research are had by both students and parents. Finally, all marketing efforts need to enforce the idea that the SHBP is meant to help students at UNH, not to make money for the university.

## **Conclusion:**

Undergraduate students at UNH take little part in choosing their health insurance coverage, and most are not well-informed of current and traditional health care topics and terminology. Some may discuss switching to the Student Health Benefits Plan with their parents if they felt it was a more affordable option or provided better coverage than their established plan, but this is not the majority case. Parents of UNH students are generally satisfied with the SHBP overall, as well as with most of its aspects. Future reenrollment seems to be based on overall satisfaction, and not on academic year, or how many years respondents have utilized the plan for their students.

While the SHBP does have some effective marketing materials already, they are dry and informative, and are not well-suited for drawing interest potential enrollees who have not already heard of the plan. Future marketing

campaigns should work to increase awareness and knowledge of the plan. Marketing materials will need to be expanded upon, such as creating and utilizing a new logo and slogan that will accompany all marketing materials for the plan. There may also be a need to change the name of the plan to better relate it to the UNH community.



## References:

- Blankinship, D. (2015, March 29). Concerns raised as colleges stop selling health insurance. Retrieved March 30, 2015 from [http://www.bostonglobe.com/news/nation/2015/03/28/colleges-getting-out-health-insurance-business/S7ICpIeATy704pIP3WNX8L/story.html?s\\_campaign=8315](http://www.bostonglobe.com/news/nation/2015/03/28/colleges-getting-out-health-insurance-business/S7ICpIeATy704pIP3WNX8L/story.html?s_campaign=8315).
- Chiauzzi, E., Donovan, E., Black, R., et al. (2011, June/July). A Survey of 100 Community Colleges on Student Substance Use, Programming, and Collaborations. *Journal of American College Health*, 59(6), 563-573. Retrieved January 21, 2015 from [http://www.tandfonline.com/doi/abs/10.1080/07448481.2010.534214#.VMAOVdXF\\_q0](http://www.tandfonline.com/doi/abs/10.1080/07448481.2010.534214#.VMAOVdXF_q0)
- Collier, K. (2009, December 7). More State Schools Require Health Insurance for Students. Retrieved November 28, 2014, from <http://abcnews.go.com/Health/public-universities-require-health-insurance-students/story?id=9228242>
- Duhon, A. (2010). Are Community Colleges Going the Distance? A Descriptive Analysis of Student Support Services for Alabama, Arkansas, Mississippi, and Tennessee Community Colleges. Retrieved January 21, 2015 from <https://digital.library.txstate.edu/bitstream/handle/10877/3637/fulltext.pdf?sequence=1>
- McIntosh, B., Compton, M., & Druss, B. (2012). Students Left Behind: The Limitations of University-Based Health Insurance for Students With Mental Illnesses. *Journal of American College Health*, 60(8), 596-598. Retrieved November 28, 2014, from [http://www.tandfonline.com/doi/full/10.1080/07448481.2012.726301#.VHjMgTHF\\_uM](http://www.tandfonline.com/doi/full/10.1080/07448481.2012.726301#.VHjMgTHF_uM)
- Sheehy, K. (2012, July 13). Healthcare Law Mandates Major Changes to College Student Plans. Retrieved November 28, 2014, from <http://www.usnews.com/education/best-colleges/articles/2012/07/13/healthcare-law-mandates-major-changes-to-college-student-plans>
- University of New Hampshire (2015). Student Health Benefits Plan (SHBP). University of New Hampshire web site. Retrieved May 3, 2015 from <http://www.unh.edu/health-services/shbp/>

## Appendix A: Student Survey

Student Health Benefits Plan Student Survey Copyright 2015 by Doucette.

Hello, and thank you for participating in this research survey.

This survey is being done as part of an honors research project by UNH Health Management and Policy senior Zack Doucette. The purpose of this survey is to research opinions, attitudes, and beliefs about health insurance and the Student Health Benefits Plan (SHBP) offered by Health Services at the UNH Durham Campus.

This thirteen question survey will ask questions pertaining to your knowledge of this benefits plan, about your current health insurance, and your involvement in choosing your health insurance. If you do not feel comfortable answering any of the questions on this survey, please skip the question entirely.

If you have any questions or concerns, please call the researcher or the UNH Professor advising this research project:

- Zack Doucette, UNH Student and Researcher at 1-(603)-475-6628, or email him at [zwp5@wildcats.unh.edu](mailto:zwp5@wildcats.unh.edu)
- Professor James Lewis, UNH Professor of Health Management and Policy at 1-(603)-862-2733, or email him at [James.Lewis@unh.edu](mailto:James.Lewis@unh.edu)

**Privacy and Confidentiality Notice:** All responses are entirely confidential – identifying information will not be sought, and any individual responses gained from this survey will never be released to the general public. Please note, that the answers you provide may be put into an overall statistic which may be presented as research. All information will be used solely by Health Services of the University of New Hampshire and by Zack Doucette and Professor James Lewis. The below signature will not be attached or referenced with your survey, but will be kept as a record that you read, understand, and agree to the terms of this survey.

I, \_\_\_\_\_ have read the above privacy and confidentiality notice and agree to have my response used for research by UNH student Zack Doucette, his research project advisor Professor James Lewis, and UNH Health Services.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Instructions: For each question, please check off one answer bubble unless otherwise noted.**

Q1. What academic year are you currently in?

- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior
- ☐ Graduate

Q2. What is your current academic major? Please include dual or double majors.

---

Q3. What level of knowledge do you have concerning these health insurance topics?

	Extensive Knowledge	Some Knowledge	No Knowledge
Where to Buy Health Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to Buy Health Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to Obtain Employer-Sponsored Health Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medicare / Medicaid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
State Health Insurance Exchanges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affordable Care Act (ACA / Obamacare)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
UNH Student Health Benefits Plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The US Healthcare System	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q4. What level of knowledge do you have of these health insurance terms?

	Extensive Knowledge	Some Knowledge	No Knowledge
Co-payment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Premium	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coinsurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Deductible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exclusions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preferred Provider Organization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Maintenance Organization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary Care Provider	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Referral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HIPAA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High-Deductible Health Plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provider Network	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q5. Who currently procures your health insurance?

- ☐ Myself
  - ☐ My parent(s)
  - ☐ Other (Please Explain)
- 

Q6. What is your primary form of insurance, provided by your answer from question 5?

- ☐ Employer-sponsored group health insurance plan
- ☐ Individual health insurance plan, purchased directly from an insurance company
- ☐ Government program (e.g. Medicare, Medicaid, TriCare)
- ☐ State Health Insurance Exchange
- ☐ University of New Hampshire Student Health Benefits Plan

Q7. What type of health insurance plan do you have?

- ☐ Single Plan
- ☐ Couple Plan
- ☐ Family Plan
- ☐ I do not know

Q8. UNH Health Services currently offers a Student Health Insurance Plan (SHIP) to full-time students to satisfy the health insurance requirement to attend UNH.

If you felt that UNH's SHIP were a more affordable option than your current form of insurance coverage, would you discuss switching your coverage provider to the SHIP with your parent(s)?

- ☐ Yes
- ☐ No
- ☐ My health insurance coverage is not through my parent(s)

Q9. If you felt than UNH's SHIP provided a better level of coverage for you than your current form of insurance coverage, how likely would you be to discuss switching your insurance provider to UNH's SHIP with your parent(s)?

- ☐ Not likely
- ☐ Somewhat likely
- ☐ Very likely
- ☐ My health insurance coverage is not through my parent(s)

Q10. How important are these factors to you when choosing health insurance?

	Very Important	Important	No Opinion	Unimportant	Very Unimportant	I Do Not Know This Term
Cost of Monthly Premiums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of Yearly Deductible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Services Covered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In-Network Provider Base	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Out-of-Network Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abroad / Out-of-Country Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insurance Administrator (E.g. Anthem, Aetna, Harvard Pilgrim)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q11. To what degree have you discussed your health insurance coverage with your parent(s)?

- ☐ Not at all
- ☐ Somewhat
- ☐ Extensively

Q12. What degree of involvement have you had in selecting your health insurance coverage?

- ☐ No involvement
- ☐ Some involvement
- ☐ Extensive involvement
- ☐ Sole involvement / I chose my health insurance on my own

Q13. Concerning your answer to question 12, why do you have this level of involvement in choosing your health insurance coverage?

---

---

---

---

---

---

## Appendix B: Email for Parent Survey from Qualtrics

Dear parent of current UNH student,

My name is Zack Doucette. I am a senior student at the University of New Hampshire, and I am conducting a research project for my honors in-major project to determine what the current perceptions, attitudes, and beliefs of parents of current UNH students are concerning the Student Health Benefits Plan offered by UNH.

Our records indicate that one or more of your children are enrolled in UNH's Student Health Benefits Plan.

I am writing to invite you to participate in this project. I plan to work with approximately 250+ parents of current UNH students in this study. The actual number of participants is dependent upon how many parents complete and return the survey. You must be at least 18 years old to participate in this study.

If you agree to participate in this study, you will be asked to complete an online, electronic survey through the Qualtrics program.

You will not receive any compensation to participate in this project.

The potential risks of participating in this study minimal. You are not anticipated to receive any direct benefits from participating in this study. The benefits of the knowledge gained are expected to be helpful in aiding UNH promote the Student Health Benefits plan to those who would benefit from utilizing it.

Participation in this study is strictly voluntary. If you refuse to participate, you will not experience any penalty or negative consequences. If you agree to participate, you may refuse to answer any question and/or if you change your mind, you may withdraw at any time during the study without penalty or negative consequence.

I will report the data anonymously and by aggregating individual responses into totals to be analyzed. Individual responses may be analyzed, but will not be linked to you in any way. The results may be used in reports, presentations, and publications.

If you have any questions about this research project or would like more information before, during, or after the study, you may contact the researcher, Zack Doucette at [zwp5@wildcats.unh.edu](mailto:zwp5@wildcats.unh.edu) or at [603-475-6628](tel:603-475-6628).

Alternatively, you may contact Zack's honors project advisor Professor James Lewis at [James.Lewis@unh.edu](mailto:James.Lewis@unh.edu).

If you have questions about your rights as a research subject, you may contact Dr. Julie Simpson in UNH Research Integrity Services at [603-862-2003](tel:603-862-2003) or [Julie.simpson@unh.edu](mailto:Julie.simpson@unh.edu) to discuss them.

**Privacy and Confidentiality Notice:** Personal identifying information will not be collected, and any individual responses gained from this survey will never be released to the general public. There are, however, certain circumstances under which data may be accessed by individuals other than the researcher. For example, in the event of a complaint about the study, the IRB and/or UNH administrators may have to review the data. The transfer of information via the internet from this survey poses minimal risk of a breach of confidentiality.

Please note, that the answers you provide may be put into an overall statistic which may be in the research findings. All information will be used solely by Health Services of the University of New Hampshire and by Zack Doucette.

**By completing and submitting the linked survey, you agree/consent to participate in this research project and understand all risks, benefits and methods of this study.**

You must enter a password to active the survey. **The password is “Wildcats”.**

**Follow this link to the Survey:**

[Take the Survey](#)

Or copy and paste the URL below into your internet browser:

[https://unh.az1.qualtrics.com/WRQualtricsSurveyEngine?Q\\_SS=4GEEu6qT8eiDgH3\\_9TfKoFIQdKvZkXz&Q\\_CHL=ei](https://unh.az1.qualtrics.com/WRQualtricsSurveyEngine?Q_SS=4GEEu6qT8eiDgH3_9TfKoFIQdKvZkXz&Q_CHL=ei)

**Follow this link to opt out of future emails:**

[Click here to unsubscribe](#)

Thank you for your valued time and consideration,

Zachary W. Doucette

[Zwp5@Wildcats.unh.edu](mailto:Zwp5@Wildcats.unh.edu)

UNH Health Management and Policy Senior



## Appendix C: Parent Survey

Student Health Benefits Plan Parent Survey Copyright 2015 by Doucette.

**Instructions: For each question, please check off one answer bubble unless otherwise noted.**

Q1. What academic year is your UNH student currently in?

- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior
- ☐ Graduate

Q2. How long has your student utilized the Student Health Benefits Plan?

- ☐ Less than one year
- ☐ Between one and two years
- ☐ Between two and three years
- ☐ Between three and four years
- ☐ More than four years

Q3. How satisfied are you with the Student Health Benefits Plan for your child?

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Neutral
- ☐ Satisfied
- ☐ Very satisfied

Q4. Has the Student Health Benefits Plan met all of your student's healthcare insurance needs while attending the University of New Hampshire? If no, please explain.

- ☐ Yes
- ☐ No - \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q5. Please indicate in the below table how satisfied you are with the chosen aspect of the Student Health Benefits Plan

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Cost of Monthly Premiums	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of Yearly Deductible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost of Copays and Coinsurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Services Covered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Basix Dental Savings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmaceutical Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In-Network Provider Base	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Out-of-Network Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abroad / Out-of-Country Coverage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insurance Administrator (E.g. Anthem, Aetna, Harvard Pilgrim)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q6. Assuming your student is still eligible, do you currently believe you will re-enroll your student in the Student Health Benefits Plan in the future? If so, for how long?

- ☐ I will not be re-enrolling my student in the Student Health Benefits Plan in the future.
- ☐ I will be re-enrolling my student in the Student Health Benefits Plan for the next year.
- ☐ I will be re-enrolling my student in the Student Health Benefits Plan for the next two years.
- ☐ I will be re-enrolling my student in the Student Health Benefits Plan for the duration of their time at the University of New Hampshire.
- ☐ My student will be graduating this year
- ☐ My student will not be eligible for the Student Health Benefits Plan in the future

Q7. Would you recommend the Student Health Benefits Plan as a healthcare coverage option to other parents of UNH students?

- ☐ Yes
- ☐ No

Q8. Please indicate whether you agree or disagree with the following statements about your choice to utilize the Student Health Benefit Plan (SHBP) for your student.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
My student would have otherwise been uninsured	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SHBP was less expensive than other insurance options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SHBP supplements other coverage because the cost is relatively inexpensive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I purchased SHBP to supplement a high deductible health plan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My student was enrolled in the SHBP because the waiver deadline was missed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q9. Please explain why you initially chose to enroll your student in the Student Health Benefits Plan.

---



---



---



---

Q10. How do you think the Student Health Benefits Plan could be improved, other than reducing costs?

---



---



---



---

## Appendix D: Student Comments on Why They Have the Degree of Involvement in Choosing their Health Insurance Coverage Reported in Question 12 of Survey

### No Involvement:

My father receives insurance through work, and he picks the best option for us, we have no say in the matter.
I am on my father's plan
I have no involvement in selecting my health insurance coverage, as I am still covered by my parent's family plan. My family's health insurance is provided by my dad's employer (American Airlines)
My parents have always done it without consulting me.
My parents haven't talked about it too much with me.
My parents have never brought it up so neither have I
My parents pick it for me
My parents get health insurance through their employers
I have never been asked about it
I'm covered through my dad's work. Whatever his company chooses is what I'm on

I have never had to be involved in the decision and I have never considered it a smart option to be on any other plan than the one my parents have
I just haven't needed to make a choice in choosing our health insurance coverage
My father works in a union so his employment allows health insurance for anyone in his family under the age of 26 to have coverage (or his spouse)
My mom gets our health insurance through her office so I don't really have a say
My father has worked at the same factory for 15 years and we have always had a family plan through that employer so I was too young to have an opinion when my parents chose that insurance. I believe that UNH insurance would be more expensive so I have not discussed it with my parents
Since it is a family plan, I am covered until I am 26 then go to seek for my own coverage. The family care that we have is very extensive and thorough which is unique. This is due to my mother working at a local hospital.
Simply because I'm riding under the insurance plan my dad receives through his employment and since we wouldn't have any without it I'm fine with whatever we have now.
I don't really understand the terms, so I can't really be involved until I research a bit more
Parents do all the work in choosing. It would be nice to know all the info.
N/A
My parents have health insurance supplied through my father's employer. It's included, so I don't really ask questions about it.

Insurance is provided through my father's job, he chooses
My parents never asked me about it and I didn't know there was much I can do
My parents get health insurance through their employers so I haven't had to make a decision about insurance coverage yet because I'm covered by them
Our family's health insurance is provided through my dad's work so I don't have a say in it
N/A
My parents take care of everything related to health insurance. I have too much to worry about at school
Because I am currently still on my families health insurance which goes through the military/navy
My dad has me on his employer sponsored health insurance plan and I trust him
My parents chose my health insurance
Because I'm under my parents
My father works for an insurance company and knows more about it than I ever want to
My mom had it before I was born so I just stuck with it

N/A
Because it is what my parents have and I've always been covered by their insurance
My parents take care of it
Because parents boss pays for it = No Control
My parents are knowledgeable about making these decisions and therefore I have not been involved
My parents pay and insure me
My parents have insurance through work. It doesn't matter to me what it is as long as its covering the services I need.
My mom works as a VP of human resources at CMC and picks our plans and implements them in the hospital, so I trust her knowledge and am well because of it
My parents choose the best option for us as a family based on coverage and price
I never talk about it with my parents, they handle everything
My parents chose this for me and my older siblings when I was younger.
Because my parents are much more knowledgeable than I am about health care/ health insurance + I trust their judgment

I am on my parents plan + it is easier to let them handle everything
N/A
I have no knowledge of health plans. It has never even come up in discussion
As a family, we've had the same insurance for years (since before I could even understand health insurance). By the time I was old enough to understand, my parents explained what insurance we had (and why) and they explained in detail what the plan entailed. We still have the same insurance.
I am on a family plan, so I just get the coverage that my parents can afford. I do not have a major health problem, therefore I am not extensively worried.
Its through my husbands company, and he took care of adding me on. He explained our coverage, and that was fine with me. We have the best plan the company offers.
My father chooses a plan through the provider that his company chooses.
My parents choose the plan offered by their work that best fits them, because I will have to get my own in a few years anyway
My mom gets covered from her employer, so she takes care of that stuff
Because I don't know much about health insurance and I am not the one paying for it anyways
I do not pay for it, so my parents chose



I have had no involvement in selecting my health insurance coverage due to my lack of knowledge on the matter
N/A
My whole family is under 1 plan that my dad manages/selects
I have never bothered to get involved in the process
Because we get what my parents company gives us. There is really nothing to select from.
My dad always got family health plan through his work so it was never an issue or discussed with the family. My parents always took care of it.
I'm on my parents policy and just know what they tell me
I am covered under my dad's insurance. I don't personally care what plan it is currently because I'm not paying. But I am in HMP401 & have learned a lot this semester about health insurance
I've never had to choose which health care I've had, my parents have it through their work
Choosing health insurance was not something I knew much about when selecting a carrier. I honestly do not know much about insurance in general
Employer based coverage for our family. Not much of a choice
My health insurance is provided to me through my dad's employer. He is very pleased with the healthcare coverage we receive, and I am still at an age that I'm covered by it

Our insurance is through my dad's work so I really did not have a say in what kind it was.
I've never thought about it/have been interested in it.
My parents take care of all this for me. I should probably learn more about this.
I feel that my parents know what kind of health insurance is best for me, at least now while I am in college
It is all decided by my mother
It's my parent's plan
My mom pays, so it's whatever she can afford
Because my dad chooses the most affordable with the best coverage for that price.
I have no involvement because I am not responsible for providing the health insurance. I receive coverage through my dad's work
We have been on the same plan for many years now. My mom purchased the plan through the marketplace while I was still in high school. She was the one responsible for that.
My parents did not involve me, they just hand me my new card when it is sent
It's a company plan so I don't have control over specifics

My mom has insurance through her work and I am on her plan
I'm a squid and they do it for me because they pay for it
Dad's company based insurance program is very good
My parents chose
Never knew before I took a health care class that much about insurance so I just had my parents do everything
It came with my mom's job so I had no input
I do not have a relationship with my step mother.
Parents provide me with it.
Parents are the ones paying the bills
They take care of all the costs for me
My parents deal with health insurance coverage stuff for our family
Insurance provider is selected by my fathers work

My parents receive health insurance through an employer and I have always been covered under their plan. I can stay on their plan until I am 26, so I will do so until I need to buy my own health insurance.
I don't pay for the insurance or any doctors visits so it really has no effect on me. Also, I don't go to the doctors often, so I'm not worried about what is covered and what is not
It's through my moms company
I am a part of my parents insurance
Because my dads company provides my [illegible].
My parents' employment options is what determines my health insurance
My parents chose the plan for me when I was at an age that I could not choose my own / my dads company provides it
I have been healthy with no serious medical issues or reason to discuss my coverage
Dad's employer
Father is health insurance broker
Because it is through parents work
Parents deal with it

I really haven't thought about it much

My dad takes care of all of that

My dad is in charge of it and receives it through his job

It is the plan my mother's job gave her and it comes me through college so I just stayed on it. They have asked me what plan I wanted, they just decided

We get our health insurance through my mom's job. Also, I don't know too much about it.

Parents have always handled it

My other gets it from working at the hospital, so we don't really look around for other options

I just accept what my mother has because it is all I need. I used to have UNIT insurance and I racked up many random bills

We have had the same insurance since I was little

I trust that my parents know what they're doing

My father's employer has provided family healthcare since I was a baby so him & my mother handle it

**Some Involvement:**

As a student athlete who plays a contact sport, I had to notify my parents of what sport I was playing. I also had to register with that sports National administrator to be allowed to play.
My mom and I have discussed my options to which I decided which insurance plan was best suited for me
My parents and I have talked about switching to the UNH plan this past year and decided it was better to go on the UNH SHIP plan
While I have not personally chosen, I have discussed with my parents the benefits of our insurance coverage compared with other plans or our past insurance plans and weighed out pros and cons
My parents bought health insurance when I was young buy they hae explained all the options with me and if I wanted to switch I could once I was 25
N/A
Since I am an out of state student, I was involved in choosing a plan that would cover me in NH
My parents don't speak english
I took HMP 401. My parents want me to know our plan and what it covers. I go to my own appointments and pay my co-pay.

**Extensive Involvement:**

Because I pay for it

**Sole Involvement / I chose my health insurance on my own:**

Because the SHIP is too expensive and I wanted it off of my tuition. So I went online and called the health insurance marketplace, found better coverage for a lower premium.
I handle my own bills and finances, my parents think its better for me to do it on my own through the school.
I am an adult student (33y/o) who is unmarried
I have been supporting myself since 16. Parents play zero role in my healthcare.

## Appendix E: Parent Comment as to Why They Would Not Recommend the SHBP to Others

yes, with qualifications about the prescription drug benefit
Only if they could not get coverage elsewhere. I feel it is expensive for young, healthy students.
I was FORCED to use it, we have a plan that UNH would not accept. This is not freedom of choice, but a terrible injustice and we are only 45 minutes away. I can see forcing insurance for kids far a way.
There is probably better coverage out there through the Affordable Care act, but I can't access it right now.
Too expensive and does not function as fully as possible.
No deductible, co-insurance. Expensive but child is covered mostly
i don't want it and they are making me pay for this!
It is actually a decent plan at a good price.
not sure
There should be a ramp for the Affordable Care Act that makes it cheaper
Not unless they had no other options - very expensive
Maybe obamacare is a better choice.
If I had alternatives, I would not re-enroll my student.
It is a good plan for the cost. I would rather use my insurance that I do not have to pay extra for..
most people I know have insurance that will cover their student, and it costs less than the in insurance.
Limited coverage, limited help,
It's expensive
I was forced to take this plan as the college would not accept our State of CT plan.
I don't know much about it I am ashamed to say
It is a good value for the money. My plan and work for family coverage is expensive and carries a high deductible.
Too costly



## Appendix F: Parent Comments as to Why They Enrolled their Student in the SHBP

Good coverage, better price than joining our family plan.
I lost my job and insurance coverage and the cost was considerably less expensive than Cobra.
VT State Medicaid not accepted by unh.
cost was cheaper than securing private insurance
The cost was less than my plan.
I met with my health insurance broker. He seemed just a bit skeptical at first, but read through the brochure. He finally tossed it on the table and said, "This is a great plan. I want this plan!!"
to get in network coverage
Our health provide is out of state. She wouldn't have access to the Kaiser system without coming back to Hawaii.
My son transferred to UNH from UVM. I work at a restaurant and do not have, nor can afford, health insurance. I have paid out of pocket. My son has always been strong and healthy with minimal medical bills. After transferring to UNH, he was required to have health insurance, costing him \$2,000 a year. I personally think it's expensive for young, college students!
I had no choice. They would not accept our current plan.
She was no longer eligible to be on our plan. The SHBP seems to be the best option available for her.
It was less expensive than adding my student to my current plan.
Her primary care doctors at home accepted the plan and her insurance plan at home would not have covered her in New Hampshire
I lost our family health coverage due to divorce. I bought mine through the affordable care market placce, and decided as a convenience to buy hers through UNH
Cheaper than my employer's health benefit package and we can roll the payment into our tuition payment.
The cost of an insurance plan through my employer is prohibitively expensive.
It is required and it is the only insurance that they would have and need so we don't pay an additional penalty.
had to, or she could not be enrolled at UNH.
My health plan as work was too expensive to put all children on the plan. The marketplace plans were not yet available and the deductibles/co-pays were too high. Also
Because they made me!!!!
lower cost
He was enrolled based on my insurance plan. My plan is very strict and he would have had to go to his primary care at hoe everytime.
We enrolled our daughter because it was mandatory for us to do so. I am very frustrated with this situation. I don't have a problem with the plan itself, but I have a problem with making this type of coverage mandatory. I strongly disagree with this policy - that every student must have full coverage, and a certain type of coverage. Our family participates in a "shared healthcare network" type program, which covers the whole family. But the university would not accept this program as adequate coverage, and required us to purchase the Student Health Benefits Plan. So now she is covered twice, at a significant added cost to us.
My other child turned 26, couldn't stay on my company's insurance so it would have been the same premium for 2 people only. Now my company offer additional tiers and one of them is a parent+child coverage but I think that we will stay with the SHBP.
SHBP was less expensive than other options
I was forced to enroll my student as she has coverage out of state and did no have a provider within an hours drive.

Really no other alternative because she cannot be covered under my Medicare plan
No other coverage options available
Didn't have a better choice!
We moved out of the country and so our son was no longer covered on our health plan.
Mass Health did not qualify as an allowed health plan for my student and Mass health only covers accidents outside of Massachusetts
My son is on Mass Health which now, UNH does not accept
I am current unemployed and do not have other health care for my student.
Her primary insurance provider (Kaiser Permanente) is based on the west coast - no Kaiser Hospitals are in the NH area. So she needs someplace to go when she gets sick. She also has Type 1 Diabetes and in case she suffers complications from her Diabetes while at school we felt it was important for her to have the UNH plan coverage as a backup.
We had a coverage plan in our country of residence which would have covered the same or more costs as the SHBP with the exception of mental health coverage. This was not considered an acceptable alternate health plan, so we were required to enroll in the SHBP. On the other hand, the SHBP covered my student for a longer period of time during her time in our home country (the alternative plan would have covered her for a maximum of 6 weeks) so it's probably the better option for us anyway. As I said, haven't had the chance to test the overseas cost coverage yet.
Cost of family plan much more expensive than just husband/wife plan, and SHBP for student.
The SHBP was cheaper than the family plan we could get.
My husband became disabled and we were on cobra and it ended, chose to put him on UNH program while I figured out plans for myself.
Because it is part of a group plan it is cheaper than being self insured. Initially our student was insured under our individual plan which was a high individual deductible with catastrophic coverage.
At the time we had a family plan with a very high deductible. This plan offered a way to offer my son better coverage at a lower deductible. Also it has proved to be a very hassle free process when my son seeks health care at the campus medical center, we know he is covered and there will be no problems. I wonder however why the insurance doesn't cover prescriptions from our local (in NH) pharmacy.
She is eligible for my health plan in Vermont but the school required that she be covered at the Durham Hospital and we were not sure that the VT plan would cover that after it renews in January.
Initially I was forced to since we were covered under Mass Health. Under my current employers plan, the cost of the family plan exceeds that of the UNH coverage and my employers individual plan combined.
Cheaper than coverage that we have as a family, while still allowing us to choose same health care provider, insurance, and doctors.
Good value. Good selection of providers and good coverage at a reasonable price
Initially, because my husband lost his job. However we continued even after we had other insurance coverage because SHBP was cost effective.
Our family only has major medical health insurance coverage. We live in California and I was concerned that she have good health insurance while at school, if needed. I believed that I did not have a choice and she had to be enrolled in the health insurance program at UNH. I think the cost of the student health insurance is double what it realistically should be. (We pay \$1,020/year at UCLA as opposed to \$2,200+/year at UNH)
Student would not have had insurance otherwise.
We had medical coverage for our student, but the policy did not cover mental illness and we were told that that coverage was a UNH mandate (We have no history of mental illness in our family).
We unfortunately qualify for NH medicare at this time. It does not cover children over the age of nineteen. So we had no choice but to enroll in the Student Health Plan. My son has not had the need to use any aspect of the plan. Which is good but like most insurance you buy and never use seems like a waste of money.

She's an older student. Aged out of coverage through parent's plan. Student plan has more value compared to the Mass. state plans she'd be eligible for.
It was available and we thought it would be better than it was.
Her dad lost his job and she no longer had health insurance
We live out of state and I wanted to make sure our daughter would be fully covered incase of an illness
Our family lost our health care coverage so I had to find something for my son.
I lost my insurance plan at work and needed to provide insurance for my child.
The coverage provided by the Student Health Benefits Plan is excellent. My daughter was covered under State insurance prior to attending UNH; the State insurance would not cover her at UNH.
For health coverage
Our family plan does not cover services outside Massachusetts except for an emergency.
Had to or else would have been uninsured
We would have had to pay for health insurance and this is much less expensive than any other plan
No other affordable options except the nightmare marketplace
My daughter would have not had health insurance otherwise, but will now have family health insurance again meaning we do not need the plan next year.
Very inexpensive coverage.
Required by UNH for his attendance. Previously enrolled in our state DSHS Medicaid plan.
Cheaper than having her on our plan
We live in New York. NH does not honor NY insurance in NH. So utilizing our daughter's insurance from home in NY doesn't work; she needed insurance while at college and this was the easiest way to go. Convenient despite another expense because we already have coverage in NY. :( Can't win.
My student was covered under my plan through work but I got laid off.
It was a benefit provided by the school as she was working for the school at this year.
Forced by the college as they would accept our plan.
Mass State Coverage expired
Cost a little less than anthem
No health insurance coverage
Good deal and ease of coverage for student attending UNH
Daughter graduated UNH last year and has her own insurance now. It was cheaper for my husband and I to be spouse +1, so we put our son on the SHBP at the time it had better coverage in new hampshire then my employment plan in massachusetts
It is less expensive and provides better benefits than the plan my wife and I are enrolled in through work.
My daughter actually had coverage already in the State of Vermont but UNH would not accept it. At the same time I am grateful that she has insurance that is readily accessible to her, the cost is affordable and the coverage, probably better.
I wasn't sure if her current health insurance would have participating providers on campus and I didn't have enough time to research this before the deadline
We lost coverage due to a job loss and this allowed us to have health coverage for our child a areasonable cost,
She would otherwise have no insurance.
Because even though she had full insurance, it was an hmo plan and the university required it. We only live in Massachusetts and I believe we were unjustly made to purchase the student insurance.
I am retiring and approaching medicare. I wanted to ensure she was covered in case something happened to my dependent insurance.
My student would otherwise not be insured at all since I cannot afford a plan other than UNH.

Good value - my work plan for family is very expensive and carries a high deductible.
he had no insurance, and is non-traditional student
His father passed away and he was insured through his work plan. It was more economical to take this plan then to go on a family plan with me.
Because our BCBS coverage does not have the required 20 sessions for Mental Health so we were required to have it. We do, however, use the UNH insurance as the student's primary insurance.
Forced to enroll! Student lives out of state does not cover other than emergencies. Students parents live 1 1/2 hrs away. Health center used twice. Total waste of money and very expensive.
There needs to be coverage for students on internships outside of new england
Was less expensive than the plan she was on and coverage was the same
On campus insurance for any need with help available should it be needed.
cheaper than other insurance i could purchase for her
Lost Group coverage
Better coverage than our high deductible plan
My son's current plan does cover NH
My son plays football for UNH Wildcat's and I was able to ensure that he was covered properly without having to worry about whether he had the proper coverage from another policy.

## Appendix G: Parent Comment as to How They Thought the SHBP Could Be Improved, Other than Reducing Costs

Add off campus pharmacy
My son is healthy so he didn't really need to use it.
Allow students to be billed for copays. Weekly office visits can become hard to afford. Working of these payments through a payment plan would be very helpful.
somehow allow that prescriptions can be refilled someplace other than at the university. If the student is home (in another state) and is on vacation, driving to the university to get a prescription filled is bothersome.
I wasn't aware of any dental benefits, but one survey question mentioned dental. If it is part of the Plan, it would be nice to know about it.
It needs to cover health care out of state (and not be out of network)
Are the students fully aware of all the services offered? If not, find a way to help the students understand all the benefits available to them.
It should cover the health exam necessary to start school.
Prescription plan needs to be reworked.
Add vision care as a regular health benefit.
Cover more.
Make sure students understand the availability and the specific benefits. I saw dental above and am not sure what that part is.
No other, need to reduce costs, esp. if required.
Better Dentix options. My son still does not have a real medical card (plastic, not Paper) and I have requested it 3 times. I would like the summary of benefits sent to his home address. Nothing on-line.
All it is doing is costing me MONEY!!! I Have insurance but they said it doesn't qualify!!!!
purchase of medications off campus
I would like to have the plan walked through with the student. For a freshman he does not even know where to go on campus for any health issues.
Allow students to go to their primary care provider not health services.
More coverage.
Co-exist somehow with the Affordable Care Act
My daughter's birth control is not available through UNH's health care. She also needed their services for an ankle injury. They were less than helpful. They asked her over and over again if it was a result of alcohol. Even though she told them it was not, they kept asking. They gave her crutches, even though she requested a boot, because crutches were difficult for her to navigate on crutches in the ice and snow. As a follow-up, requesting the boot again, they gave her an air cast that still required her to use the crutches. It would have been helpful for health services to listen, understand the student's issues and concerns. In addition, even after she provided all the information at the time of the visit, she was requested to provide the same information again.
If the UNH on campus pharmacy could stock her medications, test strips, syringes and make those available to her when needed (and at a reasonable co-pay), that would be very helpful. There have been a couple of occasions where she is on her last few supplies or last vial of insulin, and we have to scramble to have her prescriptions transferred to Rite Aid for pick up the same day, and when we do that she has to pay full price because our insurance provider doesn't cover prescriptions filled at Rite Aid. Each vial of insulin is a few hundred dollars, and the test strips and syringes also cost a ridiculous amount without insurance coverage. Then, after a prescription is filled at Rite Aid, we have to have to transfer her prescription back to Kaiser so future prescriptions are covered under our primary plan.
Tough to have prescriptions filled at school.

Our student has only used the coverage a few times so I have no comment on improvement..it has worked well.
Allowing prescription coverage at pharmacies throughout the state of NH.
Wellness offerings.
I did have a problem once because my child went to his primary care doctor instead of going to UNH health services for treatment. The issue was rectified but it took a lot of time an effort. Our doctor is less than five miles from the university and my child felt more comfortable going there in that instance. I don't think local students should be penalized for using their own physician for medical services.
I have never received any information about the SHBP so do not know what is covered, or what the cost is for services.
Make it easier to use away from the campus area.
We were late enrollees (March 2015) due to having lost health insurance coverage, it was not easy signing up late, unreturned phone calls etc., No information was ever sent out (no i.d. card, coverage info.etc. ) We were told the cost would be added to our tuition bill but never told how much it would be until my daughter couldn't register for classes due to the outstanding bill. Also ~ my daughter was given Codein for a bad cold/sinus infection when shes never taken codeine. Our primary care doctor took her off it immediately!
Not sure, have only used the coverage once. I would like to see a better dental plan though.
Reducing cost is the only improvement I recommend.
More thorough care at health services, availability of prescriptions at UNH pharmacy
Don't have an answer
Vision and dental plans
More of an explanation on what the Student Health Benefits plan entails. Maybe a full email description
Prescriptions available only at UNH pharmacy, is very inconvenient. Students do live off campus and they go home for the summer.
Would be nice if dental Basix could be used out of state. Would also be nice to easily compare SHBP to equivalent ACA plans in our state
Accept our NY insurance while at school which is beyond the scope of the college, I am sure.
We haven't used it much so don't have many comments here.
It is less expensive to keep children on the family plan through their parents. If that is not available then the plan the school offers is very good and not that expensive comparatively.
We cannot use the dental cause her dentist isn't in network and we are not changing.
I have not needed to use the insurance so I am not sure how it could improve
Cost always an issue but frequently lower premium forces hand to lower service threshold
Better understanding of coverage...we are out of state, not sure how to use insurance in MA without a referral
Let us know more details about coverage. For instance, I still do not know if this is a 12 month plan or just a plan while she is enrolled in school. For instance, will she have coverage at home over the summer?
The pain could be improved by letting the student use urgent care without health services approval
To include physical therapy
It shouldn't be mandatory if the student has full health insurance with emergency coverage even if it is out of network.
Better or more flexible out of network benefits
Very difficult to access help with questions regarding plan. A bit confusing regarding eye-care and dental. As an example I didn't realize the option for any dental was offered until taking this survey.
Provide parents with a more detailed description of covered services and providers.

being able to schedule appointments rather than waiting in line, e.g. flu shot. Several times he would wait 30 or 45 minutes in line, and then have to leave for either class or work.
Maybe to explain what all the insurance terms mean to the students more clearly. Deductible, Coinsurance etc.
Always have the insurance info available when a need arises.
clearly communicate tax relief under AHCA
Communication with an enrollment packet would be place to start...
Monthly pymt. Option would be helpful.